

08/01/03

# **Utah Trauma Registry**

## **Data Dictionary**

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Bureau of Emergency Medical Services**

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## Acknowledgements

The success of any trauma system is measured by the monitoring, evaluation and quality improvement at the pre-hospital, hospital and system level. A system must be able to monitor its performance and to assess its impact on trauma mortality and morbidity. This requires continuous evaluation of operations, demonstrations that the system is meeting its stated goals, and the documentation of system performance.

The Utah Department of Health, Bureau of Emergency Medical Services (EMS) is implementing a statewide trauma registry to track trauma patients. Trauma data will be submitted to the Bureau of EMS for review of system criteria. The data dictionary that follows will provide definitions for the consistent interpretation of the data elements throughout the data collection process.

The Bureau of EMS would like to express its sincere appreciation and gratitude to the members of the Utah Trauma Users Group who gave unselfishly of their time and expertise to develop this data dictionary. This document represents many hours of Discussion/Uses and participation by hospital personnel and data experts.

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## Introduction

Traumatic injury, both accidental and intentional, is the leading cause of death in the first four decades of life, according to the U.S. Department of Health and Human Services. Trauma typically involves young adults and results in the loss of more productive work years than both cancer and heart disease combined. Each year, more than 140,000 Americans die and approximately 80,000 are permanently disabled as a result of injury. The loss of productivity and health care costs account for 100 billion dollars annually.

Research provides evidence of the effectiveness of trauma and emergency medical services (EMS) systems in reducing mortality, morbidity, and lost productivity from traumatic injuries. However, according to the Centers for Disease Control and Prevention, studies of conventional trauma care show that as many as 35% of trauma patient deaths could have been prevented if optimal acute care had been available.

The American College of Surgeons Committee on Trauma (ACS COM) publication, *"Resources of Optimal Care of the Injured Patient"*, recommends the development and implementation of *inclusive* trauma systems, which address the needs of injured patients, regardless of where they are injured and where they receive care. Ideally, inclusive trauma systems maximize the potential of the identified system components: prevention; access; acute hospital care; rehabilitation; and research activities, to provide optimal trauma care. By focusing on developing inclusive trauma systems of care, rather than individual trauma centers, we acknowledge that few individual facilities can provide all resources to all patients in all situations.

Given that death and disability from traumatic injuries are highly preventable, the Utah Department of Health convened a Trauma System Task Force in 1993 to assist in the development of a Utah Trauma System Plan. The Task Force modeled the plan after the National Model Trauma Plan, which provides a basic framework and defines essential system components. A key component of the plan, enabling legislation, plus an ongoing appropriation of the trauma plan was accomplished in the 2000 Utah Legislative Session. This has allowed the Bureau of EMS to move forward in the implementation of the trauma plan.

The Utah Trauma System Plan is designed to help policy makers, health care providers, and community organizations establish a coordinated approach to trauma care and prevention. The plan allows local hospitals to determine what level of resources they wish to provide to their community. Ultimately, the goals of the Utah Trauma System Plan are to reduce mortality and morbidity from traumatic injuries through a comprehensive process that encourages the cooperation and coordination of all health care providers.

The Intermountain Injury Control Research Center (IICRC) will assist in system development, public information, evaluation and quality improvement, injury prevention and research components of the Utah Trauma System Plan. The IICRC will help establish a coordinated effort to thoroughly assess the operation of the current trauma system. Since all hospitals are to submit trauma data to the Bureau of EMS until July 1, 2003, the IICRC will act as the data repository and provide assistance in the development of the statewide trauma data collection system. The data collection system will provide a foundation for data-driven prevention activities and system quality improvement.

The initial charge given to the IICRC is to develop a confidential and secure database that aggregates data for traumatically injured patients presenting to all hospitals in Utah. The data system will eventually incorporate prehospital as well as rehabilitation data. Feedback reports available to all hospitals will include aggregate data and will be tailored to meet the needs of each hospital participating in the Utah Trauma System. The ultimate goal of this data collaboration is to better define what resources are needed to provide optimal care of the injured patient within an appropriately designed and funded system of care.



## Utah Trauma Registry Patient Inclusion Criteria

For the purpose of consistent data collection for the Utah Trauma Registry, except for patients defined in the **Exclusionary Criteria** below, a trauma patient is defined as a patient sustaining a traumatic injury requiring medical care for that injury within 30 days from the injury date and at least one of the following conditions associated with the medical care received:

- Hospital admission lasting for at least 2 days; or
- Patient transfer via EMS transport from one hospital to another hospital; or
- Death resulting from the traumatic injury (independent of hospital admission, transfer, or EMS-transport); or
- Patient transport by air ambulance (including death in transport and patients flown in but not admitted to the hospital).

AND

At least one of the following injury diagnostic codes defined in the International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM):

- 800—959.9
- 760.5 (fetus or new born affected by trauma),
- 641.8 (antepartum history due to trauma), or
- 518.5 (pulmonary insufficiency following trauma).

### **Exclusionary Criteria:**

Patients to be excluded from entry into the Utah Trauma Registry must have all of the following characteristics:

- 65 years of age or older
- Injury due to same-level fall

AND

One of the following isolated injury diagnosis codes defined in the International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM) diagnostic codes:

- 820.0—820.9 (isolated hip fracture)
- 808.20 (isolated fracture of the pelvis),
- 805 (isolated compression fracture of vertebral column without mention of spinal cord injury)
- 910—924 (blisters, contusions, abrasions, and insect bites).

The above-mentioned ICD-9-CM codes in the 800—959.9 range comprise the following injury sections:

#### Fracture (800-829)

- Fracture of the skull (800-804)
- Fracture of the neck and trunk (805-809)
- Fracture of upper limb (810-819)
- Fracture of lower limb (820-829)

#### Dislocation (830-839)

#### Sprain and strains of joints and adjacent muscles (840-848)

#### Intracranial injury, excluding those with skull fracture (850-854)

#### Internal injury of thorax, abdomen, and pelvis (860-869)

#### Open wound of head, neck, and trunk (870-879)

Open wound of upper limb (880-887)

Open wound of lower limb (890-897)

Injury to blood vessels (900-904)

Late effects of injuries, poisonings, toxic effects, and other external causes (905-909)

Superficial injury (910-919)

Contusion with intact skin surface (920-924)

Crushing injury (925-929)

Effects of foreign body entering through orifice (930-939)

Burns (940-949)

Injury to nerves and spinal cord (950-957)

Certain complications and unspecified injuries (958-959)

Maternal injury 760.5

Fetus or newborn affected by maternal conditions classifiable to 800-995

Other antepartum hemorrhage 641.8

Antepartum or intrapartum hemorrhage associated with trauma

Pulmonary insufficiency following trauma and surgery 518.5

## **A. Demographic Data**

**A 1. Tracking Number**

Definition	Part 1 of the two-part unique case identifier. It is the sequential number assigned by the registry software program or registrar that provides a unique identifier for a patient within a specific institution.
Software Field Name	TRACKING_NO
Data Type	Numeric (Single entry allowed)
Values	Range: 1-999999999999  Minimum of 1-digit number through a maximum of 12-digit number.
Discussion/Uses	Along with the <b>Hospital Number</b> , this number provides a unique identifier for a patient across the Utah Trauma Registry.
EDITS	NONE
EXPORT	TRACKING_NO (0)

**A 2. Hospital Number**

Definition	Part 2 of the two-part unique case identifier. It is the three digit numeric code assigned to your hospital. The combination of Trauma Registry Number and Hospital Number must be unique to the state database.
Software Field Name	INSTITUTE_NO
Data Type	Integer (Single entry allowed)
Values	<p>Your hospital code. the trauma registry software will be defaulted to bring up the code for your hospital.</p> <p>Hospital codes are assigned by the Utah Department of Health. The list of codes can be found in Appendix A—Hospital Codes, page 142.</p>
Discussion/Uses	Along with the <b>Tracking Number</b> , this number provides a unique identifier for a patient across the Utah Trauma Registry.
EDITS	UT.A2S; UT.A2SV
EXPORT	INSTITUTE_NO_SRC (0)

**A 3.****Sex**

Definition	The patient's sex.
Software Field Name	SEX
Data Type	Character (Single entry allowed)
Values	M      Male F      Female UNK    Unknown (either inadequate or no documentation)
Discussion/Uses	The patient's sex is standard demographic information used in epidemiologic analyses.
EDITS	UT.A3; UT.A3S
EXPORT	SEX_SRC (9)

**A 4. Medical Record Number**

Definition	The patient's medical record number or any number that uniquely identifies the patient.
Software Field Name	MEDICAL_RECORD_NUMBER
Data Type	Integer (Single entry allowed)
Values	Can be any value as long as the length does not exceed 15 characters.
Discussion/Uses	This data element is for audit and linking purposes only and will never be made public.
EDITS	UT.A4
EXPORT	MEDICAL_RECORD_NUMBER (2)

**A 5. Social Security Number**

Definition	The patient's Social Security Number.
Software Field Name	SOCIAL_SECURITY_NUMBER
Data Type	Character (Single entry allowed)
Values	9-digit Social Security Number (no dashes)  NA Not applicable (patient is from a foreign country or does not have a social security number)  UNK Unknown (either inadequate or no documentation)
Discussion/Uses	This number is used to match patient records when they are seen at more than one hospital and may be useful for linkage with other data systems. This number is never made public.
EDITS	UT.A5
EXPORT FIELD	SOCIAL_SECURITY_NUMBER (139)



**A 6. Patient Zip Code**

Definition	The patient's zip code at usual place of residence, if the patient lives in the United States or Canada.
Software Field Name	ZIP_CODE
Data Type	Character (Single entry allowed)
Values	United States 5 or 9 Digit Zip Code (without dashes) or Canadian Zip Code  NA Not applicable (not US or Canadian Resident)  UNK Unknown (either inadequate or no documentation)
Discussion/Uses	This data element provides useful data to assist with public health intervention, identify populations at risk, and link patients with census data so injury rates can be calculated.
EDITS	UT.A6
EXPORT FIELD	ZIP_CODE (183)

**A 7. Date of Birth**

Definition The patient's date of birth.

Software Field Name DOB

Data Type Date - mmddyyyy (Single entry allowed)

Values Valid date ("/"s and "-"s not needed in data entry)

If the patient was born on July 15, 1942, the **Date of Birth** would be entered as 07151942.

Month:

01	January	07	July
02	February	08	August
03	March	09	September
04	April	10	October
05	May	11	November
06	June	12	December

Day: 01-31

Year: The year must be 4-digits, i.e.: 2001

UNK Unknown (either inadequate or no documentation)

Discussion/Uses This data element is used to calculate patient **Age** at time of injury, if both **Date of Birth** and **Injury Date** are known. If **Date of Birth** is unknown or undocumented, enter UNK and then enter estimated or actual patient's age in the **Age** field. Either **Date of Birth** or **Age** must be entered.

EDITS UT.A7

EXPORT FIELD DOB (6)

**A 8. Age**

Definition	The patient's age at the time of injury.
Software Field Name	AGE_NUMBER
Data Type	Integer (Single entry allowed)
Values	Range: 00-120  Value for age in the appropriate unit selected. See A8. <b>Age Unit</b> .  If <b>Date of Birth</b> is unknown, <b>Age</b> may be estimated.
Discussion/Uses	<p>If you have a value entered for <b>Date of Birth</b> and <b>Injury Date</b> (see B2), Trauma registry software will calculate the <b>Age</b> and <b>Age Unit</b> for you. If either the <b>Date of Birth</b> or the <b>Injury Date</b> are unknown, then you must enter the actual or estimated <b>Age</b> and <b>Age Unit</b>.</p> <p>This data element provides useful data to assist with public health intervention, identify populations at risk, and rates of injury among age groups.</p>
EDITS	UT.A8
EXPORT FIELD	AGE_NUMBER (7)

**A 9. Age Unit**

Definition	The time increment in which the value for age is counted. This data element is used to qualify <b>Age</b> .
Software Field Name	AGE_UNITS
Data Type	Character (Single entry allowed)
Values	<p>If not automatically calculated from <b>Date of Birth</b> and <b>Injury Date</b> because either one or both are unknown, enter:</p> <p>Y      Years: if actual or estimated <b>Age</b> is 3 years or older.</p> <p>M      Months: if actual or estimated <b>Age</b> is 3 months or older but less than 3 years.</p> <p>W      Weeks: if actual or estimated <b>Age</b> is 3 weeks or older but less than 3 months.</p> <p>D      Days: if actual or estimated <b>Age</b> is 3 weeks or younger.</p> <p>For example, patient can be either 3 years, 2 months, 2 weeks, or 2 days old.</p>
Discussion/Uses	If you have a value entered for <b>Date of Birth</b> and <b>Injury Date</b> , Trauma registry software will calculate the <b>Age</b> and <b>Age Unit</b> for you. If either the <b>Date of Birth</b> or the <b>Injury Date</b> are unknown, then you must enter the actual or estimated <b>Age</b> and <b>Age Unit</b> .
EDITS	UT.A9
EXPORT_FIELD	AGE_UNITS (8)

## **B. Event Data**

**B 1. Injury Time**

Definition	The time of day the patient was injured as documented in medical record.
Software Field Name	INJURY_TIME
Data Type	Military Time - hh:mm (Single entry allowed)
Values	<p>Range: 00:00 to 23:59 (actual or reliably estimated time of injury)</p> <p>For example, if the patient was injured at 12:30 A.M., the value would be 00:30.</p> <p>UNK    Unknown (either inadequate or no documentation)</p>
Discussion/Uses	<p>Convert time to the time zone in which your facility is located, if not already done so. Preferable to use EMS documented time. Record UNK if time of injury cannot be reliably estimated.</p> <p>When a patient is injured while already an inpatient for another reason, record the <b>Injury Time</b> accurately. The <b>Hospital Arrival Time</b> and <b>Inpatient Admission Time</b> will also need to be recorded as this <b>Injury Time</b>, not the initial hospital admission time that put them in the hospital to begin with.</p> <p>This is a critical field for many other calculations. This data element is used to calculate time-lapse from <b>Injury Date/Time</b> to <b>Hospital Arrival Date/Time</b> and if applicable, <b>Inpatient Admission Date/Time</b>.</p>
EDITS	UT.B1
EXPORT FIELD	INJURY_TIME (21)

**B 2. Injury Date**

**Definition** The earliest date associated with trauma event that caused the patient to be injured. All treatment dates must be equal to or after the **Injury Date**.

**Software Field Name** INJURY\_DATE

**Data Type** Date - mmddyyyy (Single entry allowed)

**Values** Valid date ("/"s and "-"s not needed in data entry)

Month:

01	January	07	July
02	February	08	August
03	March	09	September
04	April	10	October
05	May	11	November
06	June	12	December

Day: 01-31

Year: The year must be 4-digits, i.e.: 2001

UNK Unknown (either inadequate or no documentation)

**Discussion/Uses** The patient's **Injury Date** must be within 30 days prior to the **Hospital Arrival Date** for this patient to meet the criteria for inclusion into the Utah Trauma database.

When a patient is injured while already an inpatient for another reason, record the **Injury Date** accurately. The **Hospital Arrival Date** and **Inpatient Admission Date** will also need to be recorded as this **Injury Date**, not the initial hospital admission date which put them in the hospital to begin with.

This is a critical field for many other calculations. This data element is used to calculate time-lapse from **Injury Date/Time** to **Hospital Arrival Date/Time** and if applicable, **Inpatient Admission Date/Time**.

**EDITS** UT.B2

**EXPORT FIELD** INJURY\_DATE (22)

**B 3. Cause Code**

Definition	The mechanism or external factor that caused the trauma injury event.																																												
Software Field Name	CAUSE_CODE																																												
Data Type	Character (Single entry allowed)																																												
Values	<p>Since only one value can be entered, select the cause code that is most relevant to patient injury. For example, if a person was attacked by a dog and sustained moderate bites, and then fell 20 feet resulting in a severe head injury, then select the code that caused the most significant trauma; in this case the fall.</p> <table> <tr><td>Animal</td><td>Animal related</td></tr> <tr><td>Assault</td><td>Assaulted by another person (excludes gunshot or stabbing assault)</td></tr> <tr><td>Bike</td><td>Bicycle crash (includes bicycle vs. MV)</td></tr> <tr><td>Burn</td><td>Burn (electric, thermal or chemical)</td></tr> <tr><td>Caught</td><td>Crushed or Caught between objects</td></tr> <tr><td>Diving</td><td>Diving related</td></tr> <tr><td>Explosion</td><td>Explosive force</td></tr> <tr><td>Fall</td><td>Fall (from one level to another or ground level)</td></tr> <tr><td>FB</td><td>Foreign Body</td></tr> <tr><td>GSW</td><td>Gunshot wound</td></tr> <tr><td>Hanging</td><td>Hanging</td></tr> <tr><td>Machine</td><td>Farm or heavy equipment</td></tr> <tr><td>MC</td><td>Motorcycle crash (includes MC vs. MV)</td></tr> <tr><td>MV</td><td>Motor vehicle crash</td></tr> <tr><td>OV</td><td>Other vehicular cause (includes ATV-3-wheel or 4-wheel)</td></tr> <tr><td>Other</td><td>Other cause not listed</td></tr> <tr><td>Pedestrian</td><td>Pedestrian (not bicycle vs. MV)</td></tr> <tr><td>Struck</td><td>Struck against object</td></tr> <tr><td>Smoke</td><td>Smoke inhalation</td></tr> <tr><td>Sport</td><td>Sporting injury</td></tr> <tr><td>Stab</td><td>Stab wound (includes cut, slice or pierce)</td></tr> <tr><td>UNK</td><td>Unknown (either inadequate or no documentation)</td></tr> </table>	Animal	Animal related	Assault	Assaulted by another person (excludes gunshot or stabbing assault)	Bike	Bicycle crash (includes bicycle vs. MV)	Burn	Burn (electric, thermal or chemical)	Caught	Crushed or Caught between objects	Diving	Diving related	Explosion	Explosive force	Fall	Fall (from one level to another or ground level)	FB	Foreign Body	GSW	Gunshot wound	Hanging	Hanging	Machine	Farm or heavy equipment	MC	Motorcycle crash (includes MC vs. MV)	MV	Motor vehicle crash	OV	Other vehicular cause (includes ATV-3-wheel or 4-wheel)	Other	Other cause not listed	Pedestrian	Pedestrian (not bicycle vs. MV)	Struck	Struck against object	Smoke	Smoke inhalation	Sport	Sporting injury	Stab	Stab wound (includes cut, slice or pierce)	UNK	Unknown (either inadequate or no documentation)
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Sport	Sporting injury																																												
Stab	Stab wound (includes cut, slice or pierce)																																												
UNK	Unknown (either inadequate or no documentation)																																												
Discussion/Uses	The ICD-9-CM <b>E-Code</b> data element is a multiple value field. All causes of injury can be included in that field.																																												
EDITS	UT.B3; UT.B3.S; UT.B3SV																																												
EXPORT FIELD	CAUSE_CODE_SRC (76)																																												



**B 4. Trauma Type**

Definition	The type of force that caused the injury.	
Software Field Name	TRAUMA_TYPE	
Data Type	Character (Single entry allowed)	
Values	Blunt	Injury caused by diffuse force
	Penetrating	Injury caused by point force ONLY
	Burn	Injury caused by burn (Electrical, Chemical, Thermal)
Discussion/Uses	If both blunt and penetrating force were present, select the type of trauma that caused the highest Injury Severity Score.	
EDITS	UT.B4; UT.B4S; UT.B4L	
EXPORT FIELD	TRAUMA_TYPE_SRC (52)	

**B 5. Work Related**

Definition	Indicates if a patient was at work or working when <i>trauma event</i> occurred. <i>Trauma event</i> is defined as the injury-producing event or illness-producing exposure that precipitated the patient's traumatic injury.
Software Field Name	INDUST_ACC
Data Type	Character (Single entry allowed)
Values	<p>Y Yes, patient was working when trauma event occurred.</p> <p>N No, patient was not working when trauma event occurred.</p> <p>NA Not applicable (child, unemployed, retiree)</p> <p>UNK Unknown (either inadequate or no documentation).</p>
Discussion/Uses	<p><b>Work Related</b> comprises manual or professional work for salary, bonus, other types of income or duties for which one would not normally gain an income. Use best judgment as to whether patient was working or not.</p> <p>This data element may be used to gather information about the incidence of work-related injuries and may be useful in the planning and development of work-related injury prevention programs.</p> <p><b>Work Related <u>Includes:</u></b></p> <p>Apprentice and vocational activity</p> <p>Breaks on employer premises (in hallway, rest room, cafeteria, storage area)</p> <p>Working on, arriving at, or leaving employer parking lot</p> <p>Work for pay or compensation at home</p> <p>Working in family business, including family farm (activity should clearly be related to profit-oriented business)</p> <p>Traveling on business, including to/from customer/business contacts</p> <p>Volunteer work and domestic duties such as caring for children and relatives, cleaning, cooking, gardening, and household maintenance</p> <p><b>Work Related <u>Excludes:</u></b></p> <p>Engaged in recreational activities on employer controlled facilities</p> <p>Visiting for non-work purposes, not on official business</p> <p>Homemaker working at homemaking activities</p> <p>Working of self-non profit, i.e. mowing lawn, repairing own roof, hobby or recreation activity</p> <p>Student engaged in school activities</p> <p>Operating vehicle (personal or commercial) for non-work purposes</p> <p>Commuting to or from work site</p> <p>Illicit work, e.g. drug trafficking</p> <p>Learning activities, attending school or lesson, undergoing education</p>
EDITS	UT.B5; UT.B5S
EXPORT FIELD	INDUST_ACC_SRC (216)

**B 6. Exact Location**

Definition	The exact location or specific area where injury occurred. If available, map coordinates are preferred.
Software Field Name	LOCALE
Data Type	Character/Free text field
Values	All values are allowed.
Discussion/Uses	If available, this data element is useful in describing the exact location of the injury and can be used with other injury location data to map “hotspots” in which injury prevention programs can be targeted.
EDITS	UT.B6
EXPORT FIELD	LOCALE (88)

**B 7. Injury Zip Code**

Definition	The zip code of the injury site.
Software Field Name	INJURY_ZIP
Data Type	Character (Single entry allowed)
Values	United States 5 or 9 Digit Zip Code (without dashes) or Canadian Zip Code  NA Not applicable (not US or Canadian Resident)  UNK Unknown (either inadequate or no documentation).
Discussion/Uses	Record zip code only if zip code of injury is listed in the medical record or if town/city of injury noted in medical record covers an entire zip code area. If unsure, use software to lookup zip code for the town/city of injury. It is suspected that some cases will have inadequate documentation on this variable, thus "UNK" is always a valid answer.
EDITS	UT.B7
EXPORT FIELD	INJURY_ZIP (219)

**B 8. Injury County/State**

**Definition** The county where the patient was injured if the patient was injured in Utah or the state where the patient was injured if the patient was injured outside the state of Utah.

**Software Field Name** COUNTY\_STATE

**Data Type** Character (Single entry allowed)

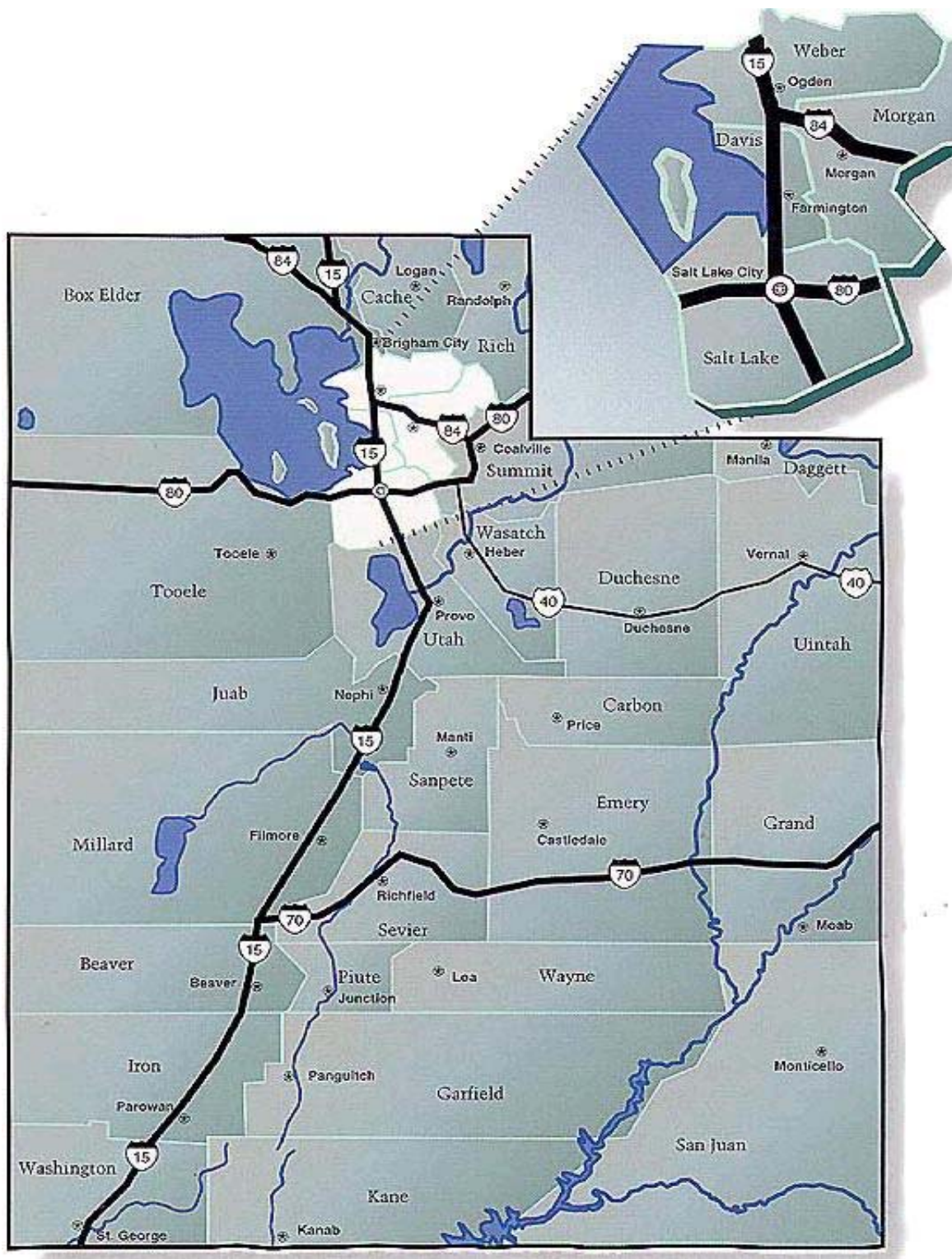
**Values** Choose County or State (excluding the number) from the following list.

<b><u>COUNTIES</u></b>		SEVIER	21
BEAVER	01	SUMMIT	22
BOX_ELDER	02	TOOELE	23
CACHE	03	UINTAH	24
CARBON	04	UTAH CO.	25
DAGGETT	05	WASATCH	26
DAVIS	06	WASHINGTON	27
DUCHESNE	07	WAYNE	28
EMERY	08	WEBER	29
GARFIELD	09	<b><u>STATES</u></b>	
GRAND	10	ARIZONA	70
IRON	11	COLORADO	71
JUAB	12	IDAHO	72
KANE	13	MONTANA	73
MILLARD	14	NEVADA	74
MORGAN	15	NEW_MEXICO	75
PIUTE	16	WYOMING	76
RICH	17	OTHER_STATE	77
SALT_LAKE	18	NA-(OUTSIDE US)	88
SAN_JUAN	19	UNKNOWN (EITHER	99
SANPETE	20	INADEQUATE OR NO	
		DOCUMENTATION)	

**Discussion/Uses** Provides useful data to assist with public health intervention, identify populations at risk, focus injury prevention programs, and assess transport issues.

**EDITS** UT.B8; UT.B8S

**EXPORT FIELD** COUNTY\_STATE\_SRC (121)



**B 9.****Town**

Definition	The city/town of the injury site. If injury site is not in city/town limits, the nearest city/town to the injury site.
Software Field Name	NEAREST_TOWN
Data Type	Character/Free text field
Values	All values are allowed.
Discussion/Uses	<p>This is not the city/town of the nearest hospital.</p> <p>Along with <b>Injury Zip</b>, this data element is used to calculate local fatality/injury rates using available population data, to help identify “hotspots” and local agencies to conduct public health interventions, to gain information about the socioeconomic status of the neighborhoods in which injuries occur (by use of US Census data),</p>
EDITS	UT.B9
EXPORT FIELD	NEAREST_TOWN (81)

**B 10. Location E-Code**

Definition The type of place where the injury occurred.

Software Field Name LOCATION

Data Type Numeric (Single entry allowed)

Values Range: 849.0-849.9 (Use ICD-9-CM E849 place of occurrence codes. Do not submit the E prefix.)

**HOME** 849.0

**Includes:** apartment, boarding house, farm house, home premises, house (residential), non-institutional place of residence, private [driveway, garage, garden, home, walk], swimming pool in private house or garden, yard of home), retirement community

**Excludes:** home under construction but not yet occupied (849.3), institutional place of residence (849.7)

**FARM** 849.1

**Includes:** buildings, land under cultivation

**Excludes:** farm house and home premises of farm (849.0)

**MINE** 849.2

(and quarry)

**Includes:** gravel pit, sand pit, tunnel under construction

**WORK** 849.3

(Industrial place and premises)

**Includes:** building under construction, dockyard, dry dock, factory building or premises, garage (place of work), industrial yard, loading platform (factory or store), industrial plant, railway yard, shop (place of work), warehouse, workhouse, any work site

**REC** 849.4

(Place for recreation and sport)

**Includes:** amusement park, baseball field, basketball court, beach resort, cricket ground, fives court, football field, golf course, gymnasium, hockey field, holiday camp, ice palace, lake resort, mountain resort, public park, racecourse, resort NOS, riding school, rifle range, seashore resort, skating rink, sports ground, sports palace, stadium, swimming pool (public), tennis court, vacation resort

**Excludes:** playground (including school playground) (PLAY), that in private house or garden (849.0)

**STREET** 849.5

**Includes:** Street and Highway



	<b>PUBLIC</b> 849.6 (Public Building) <b>Includes:</b> building (including adjacent grounds) used by the general public or by a particular group of the public, such as: airport, bank, cafe, casino, church, cinema, clubhouse, courthouse, dance hall, garage building (for car storage), hotel, market (grocery or other commodity), movie house, music hall, nightclub, office, office building, opera house, post office, public hall, radio broadcasting station, restaurant, shop - commercial, station (bus, railway), store, theater <b>Excludes:</b> home garage (849.0), industrial building or workplace (849.3), school -state, public, private (SCHOOL),
	<b>RES</b> 849.7 (Residential institution) <b>Includes:</b> children's home, dormitory, hospital, jail, old people's home, orphanage, prison, reform school, shelter, protective services, nursing home
	<b>OTHER</b> 849.8 (Other specified place) <b>Includes:</b> beach NOS, canal, caravan site NOS, derelict house, desert, dock, forest, harbor, hill, lake NOS, mountain, parking lot, parking place, pond or pool (natural), prairie, public place NOS, railway line, reservoir, river, sea, seashore NOS, stream, swamp, trailer court, woods, national park
	<b>PLAY</b> <b>Includes:</b> playground (including school playground)
	<b>SCHOOL</b> <b>Includes:</b> school -state, public, private
	<b>UNK</b> 849.9 (Unspecified place)
Discussion/Uses	<p>This data element describes the site itself regardless of the patient's reason for being there. For example: The code for a patient who works at a ski resort and is injured there would be "rec. and sport" not industrial.</p> <p>For Utah Trauma Registry purposes, additions have been made to some categories. "Retirement community" has been added to Home (849.0). "Any work site" has been added to Industrial place and premises (849.3). "Shelter, protective services, and nursing home" have been added to Residential institution (849.7).</p> <p>This data element is useful in describing the injury-producing event and is valuable for planning and evaluating prevention programs.</p>
EDITS	UT.B10; UT.B10S
EXPORT FIELD	LOCATION_SRC (145)

**B 11. Injury Details**

Definition	The details of the injury. This can be any supporting or supplemental data about the injury, environmental conditions, other circumstances, etc.
Software Field Name	INJURY_DETAILS
Data Type	Character/Free text field
Values	All values are allowed. Enter the details of the injury. This information should not repeat information contained in other fields.
Discussion/Uses	This data element helps to better convey the context of the injury event and to include important information such as intentionality that is not otherwise captured in the other data elements.
EDITS	UT.B11
EXPORT FIELD	INJURY_DETAILS (77)

**B 12. E-Codes (External-cause-of-injury codes)**

Definition	The ICD-9-CM external cause of injury code(s) for the event(s) or circumstance(s) that was/were most responsible for the principal anatomic injury to the patient.
Software Field Name	CAUSE_E_CODES
Data Type	Numeric (Multiple values allowed)
Values	Range: E800.0—E999 (Do not submit the E prefix.)  E988.9 Injury by unspecified means (Unknown or Undocumented)  See E-Codes found in the International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM) for available value codes.
Discussion/Uses	<p>This field cannot be left blank. If medical chart lists E-Code(s), record the code(s) starting with the one most relevant to the cause of injury. If no E-codes are found in medical chart, code using software code-finder lookup.</p> <p>This data element permits classification of environmental events, circumstances, and conditions as the cause of injury, poisoning, and other adverse effects.</p>
EDITS	UT.B12
EXPORT FIELD	CAUSE_E_CODES (125)

**B 13. Protective Devices**

**Definition** The protective/safety devices(s) in use or worn by the patient at the time of the injury. May be by report of the victim, a witness, or police report.

**Software Field Name** PROTECTIVE\_DEVICES

**Data Type** Character (Multiple values allowed)

**Values** Enter all that apply.

AIR	Airbag not specified
AIR.D	Driver side airbag
AIR.P	Passenger side airbag
AIR.S	Side airbag
BELT	Unspecified seat or shoulder safety belt
BELT.2PT	2 Point (lap OR shoulder only) safety belt
BELT.3PT	3 Point (lap AND shoulder) safety belt
CHILD	Child restraint
FLOAT	Flotation device
GLASS	Protective eyewear
HEL	Helmet
OTHER	Other protective device
PAD	Protective padding or clothing
NONE	No safety belt, child restraint, airbag, helmet, or other personal protective devices used
UNK	Unknown (either inadequate or no documentation)
NA	Not applicable (Patient was not injured under circumstances where use of personal protective devices was warranted.)

**Discussion/Uses**

**EDITS** UT.B13; UT.B13S; UT.B13SV

**EXPORT\_FIELD** PROTECTIVE\_DEVICES\_SRC (80)

## **C. Referring Hospital Data**

**C 1. Hospital Transfer**

Definition	A flag used to indicate the patient was transferred from an initial acute care hospital to your hospital. <u>A patient sent to your hospital from a private doctor's office, clinic, or stand-alone ambulatory surgery center <b>or</b> sent to your hospital by non-EMS transport is <b>not</b> a transfer.</u>	
Software Field Name	HOSPITAL_TRANSFER	
Data Type	Character (Single entry allowed)	
Values	Y	Yes, the patient was transferred to our hospital from another acute care hospital <u>via EMS transport</u> .
	N	No, the patient was not transferred to our hospital from another hospital <b>or</b> the patient <i>was</i> transferred to our hospital from a doctor's office, clinic, or stand-alone ambulatory surgery center <b>or</b> non-EMS provider transferred patient.
Discussion/Uses	This data element must be answered. If the answer to this field is 'N', the remaining data elements in this section should be answered 'NA' (Not applicable), meaning the patient is not a transfer therefore the referring hospital data elements do not apply. the trauma registry software will do an auto-fill of 'NA' in the fields for this section if the answer to this question is 'N'.	
EDITS	UT.C1	
EXPORT FIELD	HOSPITAL_TRANSFER (136)	

**C 2. Transport Mode into Referring Hospital**

Definition	The mode of transport into the referring hospital. From this point on, "referring hospital" is defined as the hospital that referred the patient to your hospital.
Software Field Name	TRANSFER_MODE
Data Type	Character (Single entry allowed)
Values	<p>AMB Ground ambulance</p> <p>FIX Fixed wing air</p> <p>HELI Helicopter</p> <p>LAW Law enforcement (Non-EMS)</p> <p>COM Commercial transportation/taxi (Non-EMS)</p> <p>POV "Per other vehicle" (private vehicle, walk-in, bus, non-EMS)</p> <p>UNK Unknown (either inadequate or no documentation)</p> <p>NA Not applicable, no referring hospital (Trauma registry software will auto fill this field if <b>Hospital Transfer</b> = 'N')</p>
Discussion/Uses	<p>Patient may be transported into referring hospital via non-EMS provider. However, in order to meet Utah Trauma Registry inclusion criteria, patient must be transferred out of referring facility to ED/admitting hospital via EMS transport.</p> <p>This data can be found on the medical record information that accompanies the patient from the referring hospital.</p>
EDITS	UT.C2; UT.C2S
EXPORT FIELD	TRANSFER_MODE_SRC (491)

**C 3. Referring Hospital**

Definition	The three digit numeric code assigned to the referring hospital.
Software Field Name	FROM_HOSPITAL
Data Type	Character (Single entry allowed)
Values	<p>Hospital codes are assigned by the Utah Department of Health. The list of codes can be found in Appendix A—Hospital Codes, page 142.</p> <p>Codes under 100 (non-hospital codes) are not valid responses for this question.</p> <p>UNK Unknown (either inadequate or no documentation)</p> <p>NA Not applicable, no referring hospital (Trauma registry software will auto-fill this field if <b>Hospital Transfer</b> = 'N')</p>
Discussion/Uses	<p>This field and the following fields in Section C are conditional. Complete only if the patient was transferred from another hospital to your hospital (if <b>Hospital Transfer</b> = 'Y')</p> <p>This data can be found on the medical record information that accompanies the patient from the referring hospital.</p> <p>Values under 100 in the hospital code list are clinics, doctor's offices, etc and should not be entered because they do not meet the definition of a <b>Referring Hospital</b>.</p>
EDITS	C3; C3S; C3SV
EXPORT FIELD	FROM_HOSPITAL_SRC (168)



**C 4. Referring Hospital Arrival Time**

Definition	The time the patient arrived at the referring hospital.
Software Field Name	REFERRING_ARRIVAL_TIME
Data Type	Military Time - hh:mm (Single entry allowed)
Values	Range: 00:00 to 23:59 (For example, if the patient arrived at 12:30 A.M., the value would be 00:30.)  UNK Unknown (either inadequate or no documentation)  NA Not applicable, no referring hospital (Trauma registry software will auto fill this field if <b>Hospital Transfer</b> = 'N')
Discussion/Uses	This data can be found on the medical record information that accompanies the patient from the referring hospital.
EDITS	UT.C4
EXPORT_FIELD	REFEFFING_ARRIVAL_TIME (473)

**C 5. Referring Hospital Arrival Date**

**Definition** The date the patient arrived at the referring hospital.

**Software Field Name** REFERRING\_ARRIVAL\_DATE

**Data Type** Date – mmddyyyy (Single entry allowed)

**Values** Valid date ("/"s and "-"s not needed in data entry)  
Enter the month, day and year of the referring hospital arrival date.

**Month:**

01	January	07	July
02	February	08	August
03	March	09	September
04	April	10	October
05	May	11	November
06	June	12	December

**Day:** 01-31

**Year:** The year must be 4-digits, i.e.: 2001

UNK Unknown (either inadequate or no documentation)

NA Not applicable, no referring hospital (Trauma registry software will auto fill this field if **Hospital Transfer** = 'N')

**Discussion/Uses** This data can be found on the medical record information that accompanies the patient from the referring hospital.

**EDITS** UT.C5

**EXPORT FIELD** REFERRING\_ARRIVAL\_DATE (472)

**C 6. Referring Hospital Discharge Time**

Definition	The time the patient was discharged from the referring hospital.
Software Field Name	REFERRING_DISCHARGE_TIME
Data Type	Military Time - hh:mm (Single entry allowed)
Values	Range: 00:00 to 23:59 (For example, if the patient was discharged at 12:30 A.M., the value would be 00:30.)  UNK Unknown (either inadequate or no documentation)  NA Not applicable, no referring hospital (Trauma registry software will auto fill this field if <b>Hospital Transfer</b> = 'N')
Discussion/Uses	This data can be found on the medical record information that accompanies the patient from the referring hospital.
EDITS	UT.C6
EXPORT_FIELD	REFERRING_DISCHARGE_TIME (474)

**C 7. Referring Hospital Discharge Date**

Definition	The date the patient was discharged from the referring hospital.																											
Software Field Name	REFERRING_DISCHARGE_DATE																											
Data Type	Date – mmddyyyy (Single entry allowed)																											
Values	Valid date ("/"s and "-"s not needed in data entry)  Enter the month, day and year of the referring hospital discharge date.  <b>Month:</b> <table><tr><td>01</td><td>January</td><td>07</td><td>July</td></tr><tr><td>02</td><td>February</td><td>08</td><td>August</td></tr><tr><td>03</td><td>March</td><td>09</td><td>September</td></tr><tr><td>04</td><td>April</td><td>10</td><td>October</td></tr><tr><td>05</td><td>May</td><td>11</td><td>November</td></tr><tr><td>06</td><td>June</td><td>12</td><td>December</td></tr></table> <b>Day:</b> 01-31  <b>Year:</b> The year must be 4-digits, i.e.: 2001  UNK    Unknown (either inadequate or no documentation)  NA    Not applicable, no referring hospital (Trauma registry software will auto fill this field if <b>Hospital Transfer</b> = 'N')				01	January	07	July	02	February	08	August	03	March	09	September	04	April	10	October	05	May	11	November	06	June	12	December
01	January	07	July																									
02	February	08	August																									
03	March	09	September																									
04	April	10	October																									
05	May	11	November																									
06	June	12	December																									
Discussion/Uses	This data can be found on the medical record information that accompanies the patient from the referring hospital.																											
EDITS	UT.C7																											
EXPORT FIELD	REFERRING DISCHARGE DATE (475)																											

**C 8. Referring Hospital Admission Type**

Definition	The type of admission at referring hospital.
Software Field Name	REFERRING_ADMIT_TYPE
Data Type	Character (Single entry allowed)
Values	A Admitted as an inpatient or to the OR E ED care only UNK Unknown (either inadequate or no documentation) NA Not applicable, no referring hospital (Trauma registry software will auto fill this field if <b>Hospital Transfer</b> = 'N')
Discussion/Uses	This data can be found on the medical record information that accompanies the patient from the referring hospital.
EDITS	UT.C8
EXPORT FIELD	REFERRING_ADMIT_TYPE (524)

**C 9. Referring Hospital Pulse Rate**

Definition	The first palpable pulse rate expressed as number per minute initially assessed upon arrival in the referring hospital.
Software Field Name	PREF
Data Type	Integer (Single entry allowed)
Values	Range: 0—400  NOT Not assessed per documentation  UNK Unknown (either inadequate or no documentation)  NA Not applicable, no referring hospital (Trauma registry software will auto fill this field if <b>Hospital Transfer</b> = 'N')
Discussion/Uses	<p>This measure should be in the first set of vital signs recorded within fifteen minutes of each other upon arrival in referring hospital. If it is not done in this time period, record NOT.</p> <p>This data can be found on the medical record information that accompanies the patient from the referring hospital.</p>
EDITS	UT.C9
EXPORT_FIELD	PULSE / TS_NUMBER / TRAUMA_SCORE_LOCATION_CODE (55/166/65)

**C 10. Referring Hospital Respiratory Rate**

Definition	The first unassisted patient respiratory rate expressed as number per minute initially assessed upon arrival in the referring hospital.
Software Field Name	RRREF
Data Type	Character (Single entry allowed)
Values	<p>Range: 0—100</p> <p>*If patient is apneic prior to intervention, record as 0.</p> <p>ASSIST Unassisted rate is not measurable due to sedation, paralysis or assisted ventilation (including bag-valve-mask and EOA).</p> <p>NOT Not assessed (reason other than ASSIST) per documentation</p> <p>UNK Unknown (either inadequate or no documentation)</p> <p>NA Not applicable, no referring hospital (Trauma registry software will auto fill this field if <b>Hospital Transfer</b> = 'N')</p>
Discussion/Uses	<p>This measure should be in the first set of vital signs recorded within fifteen minutes of each other upon arrival in referring hospital. If it is not done in this time period, record NOT.</p> <p>This data can be found on the medical record information that accompanies the patient from the referring hospital.</p> <p>The trauma registry software uses values entered in this field to calculate the Revised Trauma Score. See Appendix D—Calculating Revised Trauma Score, page 148.</p>
EDITS	UT.C10
EXPORT_FIELD	RESP_RATE / TS_NUMBER / TRAUMA_SCORE_LOCATION_CODE (53/166/65)

**C 11. Referring Hospital Systolic Blood Pressure**

**Definition** The systolic blood pressure initially assessed upon arrival in the referring hospital.

**Software Field Name** SBPREF

**Data Type** Character (Single entry allowed)

**Values** Range: 0—300

NOT Not assessed per documentation

UNK Unknown (either inadequate or no documentation)

NA Not applicable, no referring hospital (Trauma registry software will auto fill this field if **Hospital Transfer** = 'N')

**Discussion/Uses** This measure should be in the first set of vital signs recorded within fifteen minutes of each other upon arrival in referring hospital. If it is not done in this time period, record NOT.

This data can be found on the medical record information that accompanies the patient from the referring hospital.

The trauma registry software uses values entered in this field to calculate the Revised Trauma Score. See Appendix D—Calculating Revised Trauma Score, page 148.

**EDITS** UT.C11

**EXPORT FIELD** SYS\_BP / TS\_NUMBER / TRAUMA\_SCORE\_LOCATION\_CODE (56/166/65)



**C 12. Referring Hospital Eye Opening Response**

Definition	The first assessment of the patient's eye opening response for the Glasgow Coma Score upon arrival in the referring hospital.
Software Field Name	EYEREF
Data Type	Character (Single entry allowed)
Values	<p>Range: 1—4</p> <p><u>Pediatric*</u> eye opening response</p> <p>(*For the purposes of this data element, a pediatric patient is defined as a person &lt;50 kg or 10 years of age and younger.)</p> <p>1 No eye opening</p> <p>2 Eye opening to pain</p> <p>3 Eye opening to verbal command</p> <p>4 Eyes open spontaneously</p> <p><u>Adult</u> eye opening response</p> <p>1 No eye opening</p> <p>2 Eye opening to pain</p> <p>3 Eye opening to verbal command</p> <p>4 Eyes open spontaneously</p> <hr/> <p>NOT Not assessed per documentation</p> <p>UNK Unknown (either inadequate or no documentation)</p> <p>NA Not applicable, no referring hospital (Trauma registry software will auto fill this field if <b>Hospital Transfer</b> = 'N')</p>
Discussion/Uses	<p>This measure should be in the first set of vital signs recorded within fifteen minutes of each other upon arrival in referring hospital. If it is not done in this time period, record NOT.</p> <p>This data can be found on the medical record information that accompanies the patient from the referring hospital.</p> <p>The trauma registry software uses values entered in this field to calculate the Revised Trauma Score. See Appendix D—Calculating Revised Trauma Score, page 148.</p>
EDITS	UT.C12
EXPORT_FIELD	EYE_OPENING / TS_NUMBER / TRAUMA_SCORE_LOCATION_CODE (59/166/65)

**C 13. Referring Hospital Verbal Response**

Definition	The first assessment of the patient's verbal response for the Glasgow Coma Score upon arrival in the referring hospital.
Software Field Name	VERBALREF
Data Type	Character (Single entry allowed)
Values	<p>Range: 1—5</p> <p>*If the patient is intubated and deeply comatose, enter 1. If an intubated patient can respond appropriately, the provider may gauge the responses and assign a 1 (none) to 5 (oriented).</p> <p><u>Pediatric</u> verbal response</p> <p>(*For the purposes of this data element, a pediatric patient is defined as a person &lt;50 kg or 10 years of age and younger.)</p> <p>1 No vocal response</p> <p>2 Inconsolable, agitated</p> <p>3 Inconsistently consolable, moaning</p> <p>4 Cries but is consolable, inappropriate interactions</p> <p>5 Smiles, oriented to sounds, follows objects, interacts</p> <p><u>Adult</u> verbal response</p> <p>1 No verbal response</p> <p>2 Incomprehensible sounds; moaning</p> <p>3 Inappropriate words</p> <p>4 Confused</p> <p>5 Oriented</p> <hr/> <p>NOT Not assessed per documentation</p> <p>UNK Unknown (either inadequate or no documentation)</p> <p>NA Not applicable, no referring hospital (Trauma registry software will auto fill this field if <b>Hospital Transfer</b> = 'N')</p>
Discussion/Uses	<p>This measure should be in the first set of vital signs recorded within fifteen minutes of each other upon arrival in referring hospital. If it is not done in this time period, record NOT.</p> <p>This data can be found on the medical record information that accompanies the patient from the referring hospital.</p> <p>The trauma registry software uses values entered in this field to calculate the Revised Trauma Score. See Appendix D—Calculating Revised Trauma Score, page 148.</p>
EDITS	UT.C13
EXPORT FIELD	VERBAL_RESPONSE / TS_NUMBER / TRAUMA_SCORE_LOCATION_CODE (61/166/65)

**C 14. Referring Hospital Motor Response**

Definition	The first assessment of the patient's motor response for the Glasgow Coma Score upon arrival in the referring hospital.
Software Field Name	MOTORREF
Data Type	Character (Single entry allowed)
Values	<p>Range: 1—6</p> <p>*An appropriate response for a quadriplegic may be shrugging shoulders or purposeful movement on command.</p> <p><u>Pediatric</u> motor response</p> <p>(*For the purposes of this data element, a pediatric patient is defined as a person &lt;50 kg or 10 years of age and younger.)</p> <p>1 No motor response</p> <p>2 Extension to pain</p> <p>3 Flexion to pain</p> <p>4 Withdrawal from pain</p> <p>5 Localizing pain</p> <p>6 Obeys commands with appropriate motor response</p> <p><u>Adult</u> motor response</p> <p>1 No motor response</p> <p>2 Extension to pain</p> <p>3 Flexion to pain</p> <p>4 Withdrawal from pain</p> <p>5 Localizing pain</p> <p>6 Obeys commands with appropriate motor response</p> <hr/> <p>NOT Not assessed per documentation</p> <p>UNK Unknown (either inadequate or no documentation)</p> <p>NA Not applicable, no referring hospital (Trauma registry software will auto fill this field if <b>Hospital Transfer</b> = 'N')</p>
Discussion/Uses	<p>This measure should be in the first set of vital signs recorded within fifteen minutes of each other upon arrival in referring hospital. If it is not done in this time period, record NOT.</p> <p>This data can be found on the medical record information that accompanies the patient from the referring hospital.</p> <p>The trauma registry software uses values entered in this field to calculate the Revised Trauma Score. See Appendix D—Calculating Revised Trauma Score, page 148.</p>
EDITS	UT.C14
EXPORT FIELD	MOTOR_RESPONSE / TS_NUMBER / TRAUMA_SCORE_LOCATION_CODE (C)(1)(CC)(CC)



**C 15. Referring Hospital Eye Opening Response GCS Qualifier (Eye Obstruction)**

Definition	A flag used to indicate if patient is experiencing some obstruction to the eye that would hinder the first assessment of the Glasgow Coma Score upon arrival in the referring hospital.								
Software Field Name	EYE_STATUS_REF								
Data Type	Character (Single entry allowed)								
Values	<table><tr><td>Y</td><td>Yes, patient had eye obstruction.</td></tr><tr><td>N</td><td>No indication that patient had eye obstruction.</td></tr><tr><td>UNK</td><td>Unknown (either inadequate or no documentation)</td></tr><tr><td>NA</td><td>Not applicable, no referring hospital (Trauma registry software will auto fill this field if <b>Hospital Transfer</b> = 'N')</td></tr></table>	Y	Yes, patient had eye obstruction.	N	No indication that patient had eye obstruction.	UNK	Unknown (either inadequate or no documentation)	NA	Not applicable, no referring hospital (Trauma registry software will auto fill this field if <b>Hospital Transfer</b> = 'N')
Y	Yes, patient had eye obstruction.								
N	No indication that patient had eye obstruction.								
UNK	Unknown (either inadequate or no documentation)								
NA	Not applicable, no referring hospital (Trauma registry software will auto fill this field if <b>Hospital Transfer</b> = 'N')								
Discussion/Uses	This data can be found on the medical record information that accompanies the patient from the referring hospital.								
EDITS	UT.C15								
EXPORT FIELD	EYE_STATUS / TS_NUMBER / TRAUMA_SCORE_LOCATION_CODE (734/166/65)								

**C 16. Referring Hospital Verbal Response GCS Qualifier (Intubated)**

Definition	A flag used to indicate if patient was intubated at the time of first assessment of the Glasgow Coma Score upon arrival in the referring hospital.		
Software Field Name	VERBAL_STATUS_REF		
Data Type	Character (Single entry allowed)		
Values	Y	Yes, patient intubated.	
	N	No indication that patient intubated.	
	UNK	Unknown (either inadequate or no documentation)	
	NA	Not applicable, no referring hospital (Trauma registry software will auto fill this field if <b>Hospital Transfer</b> = 'N')	
Discussion/Uses	This data can be found on the medical record information that accompanies the patient from the referring hospital.		
EDITS	UT.C16		
EXPORT FIELD	VERBAL_STATUS / TS_NUMBER / TRAUMA_SCORE_LOCATION_CODE (735/166/65)		

**C 17. Referring Hospital Motor Response GCS Qualifier (Chemically Paralyzed)**

Definition	A flag used to indicate if patient was chemically paralyzed at the time of first assessment of the Glasgow Coma Score upon arrival in the referring hospital.
Software Field Name	MOTOR_STATUS_REF
Data Type	Character (Single entry allowed)
Values	Y Yes, patient was chemically paralyzed. N No indication that patient was chemically paralyzed. UNK Unknown (either inadequate or no documentation) NA Not applicable, no referring hospital (Trauma registry software will auto fill this field if <b>Hospital Transfer</b> = 'N')
Discussion/Uses	This data can be found on the medical record information that accompanies the patient from the referring hospital.
EDITS	UT.C17
EXPORT FIELD	MOTOR_STATUS / TS_NUMBER / TRAUMA_SCORE_LOCATION_CODE (736/166/65)

**C 18. Referring Hospital Glasgow Coma Score Total**

Definition	The severity of injury as reflected by the first assessment of total GCS upon arrival in the referring hospital.
Software Field Name	GLASCOWREF
Data Type	Character (Single entry allowed)
Values	<p>Range: 3—15</p> <p>If "A &amp; O X 3" or "A &amp; O X 4" is documented in medical chart, record GCS as 15.</p> <p>NOT    Not assessed per documentation</p> <p>UNK    Unknown (either inadequate or no documentation)</p> <p>NA    Not applicable, no referring hospital (Trauma registry software will auto fill this field if <b>Hospital Transfer</b> = 'N')</p>
Discussion/Uses	<p>This measure should be in the first set of vital signs recorded within fifteen minutes of each other upon arrival in referring hospital. If it is not done in this time period, record NOT.</p> <p>This data can be found on the medical record information that accompanies the patient from the referring hospital.</p> <p>The trauma registry software uses values entered in this field to calculate the Revised Trauma Score. See Appendix D—Calculating Revised Trauma Score, page 148.</p>
EDITS	UT.C18 (Pass)
EXPORT FIELD	GLASGOW / TS_NUMBER / TRAUMA_SCORE_LOCATION_CODE 164/166/65)



**C 19. Referring Hospital Airway Management**

Definition	Describes the airway resuscitation procedures performed upon arrival in the referring hospital.
Software Field Name	REF_AIRWAY
Data Type	Character (Single entry allowed)
Values	<p>*Select the most invasive airway procedure successfully performed.</p> <p>ATT    Attempted and documented unsuccessful</p> <p>BM     Bag and mask</p> <p>CONT   Continued airway management from EMS (specify which type of airway management was continued)</p> <p>CRIC   Cricothyrotomy</p> <p>EOA    Esophageal obturator</p> <p>NASO   Nasopharyngeal airway</p> <p>NETT   Nasal ETT</p> <p>ORAL   Oral airway</p> <p>OETT   Oral ETT</p> <p>TRACH   Tracheostomy</p> <p>NONE   Oxygen administration only (e.g. nasal cannula or mask)</p> <p>NOT    Not performed per documentation (other than NONE)</p> <p>UNK    Unknown (either inadequate or no documentation)</p> <p>NA      Not applicable, no referring hospital (Trauma registry software will auto-fill this field if <b>Hospital Transfer</b> = 'N')</p>
Discussion/Uses	This data can be found on the medical record information that accompanies the patient from the referring hospital.
EDITS	UT.C19 (Pass)
EXPORT FIELD	PROCEDURE_CODE_SRC / PROCEDURE_LOCATION_CODE / PROCEDURE_RESULT (129/118/115)

**C 20. Referring Hospital CPR**

Definition Identifies if CPR was performed upon arrival in the referring hospital.

Software Field Name REF\_CPR

Data Type Character (Single entry allowed)

Values

Y	Yes, CPR performed.
N	No, CPR not performed per documentation.
UNK	Unknown (either inadequate or no documentation)
NA	Not applicable, no referring hospital (Trauma registry software will auto fill this field if <b>Hospital Transfer</b> = 'N')

Discussion/Uses This data can be found on the medical record information that accompanies the patient from the referring hospital.

EDITS UT.C20 (Pass)

EXPORT FIELD PROCEDURE\_CODE\_SRC / PROCEDURE\_LOCATION\_CODE / PROCEDURE\_RESULT (129/118/115)

**C 21. Referring Hospital Fluids Administered**

Definition	Describes the approximate volume of fluids administered upon arrival in the referring hospital.
Software Field Name	REF_FLUIDS
Data Type	Character (Single entry allowed)
Values	Includes normal saline, dextrose, lactated ringers, and cryoprecipitate.  <u>Pediatric</u> (*For the purposes of this data element, a pediatric patient is defined as a person <50 kg or 10 years of age and younger.) <20            Less than 20cc/kg administered 20-40           20 to 40cc/kg administered >40            Greater than 40cc/kg administered IVF.UNK       IV fluids: unknown amount  <u>Adult</u> <500           Less than 500 ml administered 500-2000       500 to 2000 ml administered >2000          Greater than 2000 ml administered IVF.UNK       IV fluids: unknown amount  <hr/> NOT            Not performed per documentation UNK            Unknown (either inadequate or no documentation) NA             Not applicable, no referring hospital (Trauma registry software will auto fill this field if <b>Hospital Transfer</b> = 'N')
Discussion/Uses	This data can be found on the medical record information that accompanies the patient from the referring hospital.
EDITS	UT.C21 (Pass)
EXPORT FIELD	PROCEDURE_CODE_SRC / PROCEDURE_LOCATION_CODE / PROCEDURE_RESULT (129/118/115)

**C 22. Referring Hospital Blood Given**

Definition	Specifies if blood or blood products were given upon arrival in the referring hospital.
Software Field Name	REF_BLOOD
Data Type	Character (Single entry allowed)
Values	<p>Blood or blood products <b>include</b>: whole blood, packed red blood cells, platelets, plasmanate, cell saver, fresh frozen plasma, and albumin.</p> <p>Blood or blood products <b>do not include</b>: artificial blood products such as cryoprecipitate.</p> <p>Y      Yes, blood or blood products given NOS.</p> <p>N      No, blood or blood products not given per documentation.</p> <p>UNK    Unknown (either inadequate or no documentation)</p> <p>NA      Not applicable, no referring hospital (Trauma registry software will auto fill this field if <b>Hospital Transfer</b> = 'N')</p>
Discussion/Uses	This data can be found on the medical record information that accompanies the patient from the referring hospital.
EDITS	UT.C22 (Pass)
EXPORT FIELD	PROCEDURE_CODE_SRC / PROCEDURE_LOCATION_CODE / PROCEDURE_RESULT (129/118/115)

**C 23. Referring Hospital Thoracostomy**

Definition	Indicates if a thoracostomy (needle or chest tube) was performed upon arrival in the referring hospital.	
Software Field Name	REF_THOR	
Data Type	Character (Single entry allowed)	
Values	Y	Yes, a thoracostomy was performed.
	N	No, a thoracostomy was not performed per documentation.
	UNK	Unknown (either inadequate or no documentation)
	NA	Not applicable, no referring hospital (Trauma registry software will auto fill this field if <b>Hospital Transfer</b> = 'N')
Discussion/Uses	This data can be found on the medical record information that accompanies the patient from the referring hospital.	
EDITS	UT.C23 (Pass)	
EXPORT FIELD	PROCEDURE_CODE_SRC / PROCEDURE_LOCATION_CODE / PROCEDURE_RESULT (129/118/115)	

**C 24. Referring Hospital Head CT**

Definition Identifies if a head CT was performed in the referring hospital.

Software Field Name REF\_HEADCT

Data Type Character (Single entry allowed)

Values

Y	Yes, a head CT was performed.
N	No, a head CT was not performed per documentation.
UNK	Unknown (either inadequate or no documentation)
NA	Not applicable, no referring hospital (Trauma registry software will auto fill this field if <b>Hospital Transfer</b> = 'N')

Discussion/Uses This data can be found on the medical record information that accompanies the patient from the referring hospital.

EDITS UT.C24 (Pass)

EXPORT FIELD PROCEDURE\_CODE\_SRC / PROCEDURE\_LOCATION\_CODE /  
PROCEDURE\_RESULT (129/118/115)

**C 25. Referring Hospital Diagnostic Peritoneal Lavage**

Definition	Indicates if a diagnostic peritoneal lavage (DPL or PL) was performed in the referring hospital.	
Software Field Name	REF_PL	
Data Type	Character (Single entry allowed)	
Values	Y	Yes, a DPL was performed.
	N	No, a DPL was not performed per documentation.
	UNK	Unknown (either inadequate or no documentation)
	NA	Not applicable, no referring hospital (Trauma registry software will auto fill this field if <b>Hospital Transfer</b> = 'N')
Discussion/Uses	This data can be found on the medical record information that accompanies the patient from the referring hospital.	
EDITS	UT.C25 (Pass)	
EXPORT FIELD	PROCEDURE_CODE_SRC / PROCEDURE_LOCATION_CODE / PROCEDURE_RESULT (129/118/115)	

**C 26. Referring Hospital Focused Abdominal Sonography Test**

Definition	Identifies if a focused abdominal sonography test (FAST) was performed in the referring hospital.	
Software Field Name	REF_FAST	
Data Type	Character (Single entry allowed)	
Values	Y	Yes, a FAST was performed.
	N	No, a FAST was not performed per documentation.
	UNK	Unknown (either inadequate or no documentation)
	NA	Not applicable, no referring hospital (Trauma registry software will auto fill this field if <b>Hospital Transfer</b> = 'N')
Discussion/Uses	This data can be found on the medical record information that accompanies the patient from the referring hospital.	
EDITS	UT.C26 (Pass)	
EXPORT FIELD	PROCEDURE_CODE_SRC / PROCEDURE_LOCATION_CODE / PROCEDURE_RESULT (129/118/115)	



**C 27. Referring Hospital Abdominal CT**

Definition	Indicates if an abdominal CT was performed in the referring hospital.	
Software Field Name	REF_ABDCT	
Data Type	Character (Single entry allowed)	
Values	Y	Yes, an abdominal CT was performed.
	N	No, an abdominal CT was not performed per documentation.
	UNK	Unknown (either inadequate or no documentation)
	NA	Not applicable, no referring hospital (Trauma registry software will auto fill this field if <b>Hospital Transfer</b> = 'N')
Discussion/Uses	This data can be found on the medical record information that accompanies the patient from the referring hospital.	
EDITS	UT.C27 (Pass)	
EXPORT FIELD	PROCEDURE_CODE_SRC / PROCEDURE_LOCATION_CODE / PROCEDURE_RESULT (129/118/115)	

## **D. EMS Transport/Scene Data**

**D 1. Transport Mode Into Hospital**

Definition	Of all the legs of transport that ultimately carried the patient to your hospital, the type of transport that resulted in <i>the greatest distance transported</i> .
Software Field Name	TRANS
Data Type	Character (Single entry allowed)
Values	<p>AMB Ground ambulance</p> <p>FIX Fixed wing air</p> <p>HELI Helicopter</p> <p>LAW Law enforcement (Non-EMS)</p> <p>COM Commercial transportation/taxi (Non-EMS)</p> <p>POV "Per other vehicle" (private vehicle, walk-in, bus, non-EMS)</p> <p>UNK Unknown (either inadequate or no documentation)</p>
Discussion/Uses	<p>This is a key field for completing other Prehospital/EMS data elements.</p> <p>If <b>Transport Mode Into Hospital</b> indicates an <b>EMS Agency</b> was involved in transport ('AMB', 'FIX', or 'HELI'), then data for remaining Prehospital/EMS fields is required.</p> <p>If <b>Transport Mode Into Hospital</b> indicates an <b>EMS Agency</b> was <u>not</u> involved in transport ('LAW', 'COM', or 'POV'), then the remaining data elements in this section should be answered 'Not applicable', meaning, the patient was not transferred by an <b>EMS Agency</b> therefore the Prehospital/ EMS data elements do not apply.</p>
EDITS	UT.D1; UT.D1S; UT.D1SV
EXPORT FIELD	TRANS_SRC

**D 2. EMS Agency**

Definition	The code for each <b>EMS Agency</b> involved in transporting the patient from the scene of injury to arrival in your hospital.
Software Field Name	TRANSPORT_AGENCY_CODE
Data Type	Character (Multiple entry allowed)
Values	<p>Range: 0101L—2931L; 3000L</p> <p>*Each <b>EMS Agency</b> in the state of Utah is assigned a code by the Utah Department of Health. See Appendix B—EMS Agency Codes, page 144 for the list of Licensed Utah EMS Agency codes.</p> <p>3000L Unspecified Utah EMS agency</p> <p>OTHER Other out of state EMS agency</p> <p>UNK Unknown (either inadequate or no documentation)</p> <p>NA Not applicable, no EMS transport</p>
Discussion/Uses	<p>Sequentially enter <u>each</u> <b>EMS Agency</b> involved in transporting the patient starting with the first <b>EMS Agency</b> that transported the patient (usually the agency at the scene of injury). The last <b>EMS Agency</b> should be the agency that transported the patient to your hospital, if applicable.</p> <p>This data can be found on the EMS Trip Form, Run Sheet or other information from the <b>EMS Agency</b> that transported the patient.</p>
EDITS	UT.D2; UT.D2S; UT.D2SV
EXPORT FIELD	TRANSPORT_AGENCY_CODE_SRC

**D 3. EMS Origin**

Definition	The place where patient transport by an <b>EMS Agency</b> began.	
Software Field Name	TRANSPORT_ORIGIN	
Data Type	Character (Multiple entry allowed)	
Values	SCENE	Transporting agency from the scene of injury
	NONTRANS	Non transporting EMS agency (i.e first responder, fire department, etc. )
	REF	Referring hospital (includes clinics and doctors offices)
	TRANS	Rendezvous point with other EMS transport unit, (i.e. ground ambulance, fixed wing or helicopter)
	UNK	Unknown (either inadequate or no documentation)
	NA	Not applicable, no EMS transport
Discussion/Uses	Sequentially enter all the origins where patient transports by an <b>EMS Agency</b> began, starting with the first leg of EMS transport.	
	The last <b>EMS Origin</b> should be the place patient was seen at prior to transport by an <b>EMS Agency</b> to your hospital, if applicable.	
	This data can be found on the EMS Trip Form, Run Sheet or other information from the <b>EMS Agency</b> that transported the patient.	
EDITS	D3; D3S; D3SL(checks for more than one TRANSPORT_ORIGIN of 'SCENE')	
EXPORT FIELD	TRANSPORT_ORIGIN_SRC	

**D 4. EMS Notify Time**

Definition	The time the <b>EMS Agency</b> was notified/dispatched to transport the patient.
Software Field Name	NOTIFY_TIME
Data Type	Military Time - hh:mm (Multiple entry allowed)
Values	Range: 00:00 to 23:59  UNK Unknown (either inadequate or no documentation)  NA Not applicable, no EMS transport
Discussion/Uses	Sequentially enter all the notification times for each <b>EMS Agency</b> involved in transporting the patient, starting with the first leg of EMS transport.  This data can be found on the EMS Trip Form, Run Sheet or other information from the <b>EMS Agency</b> that transported the patient.
EDITS	UT.D4
EXPORT FIELD	NOTIFY_TIME

**D 5. EMS Notify Date**

Definition	The date the <b>EMS Agency</b> was notified/dispatched to transport the patient.																											
Software Field Name	NOTIFY_DATE																											
Data Type	Date - mmddyyyy (Multiple entry allowed)																											
Values	Valid date ("/"s and "-"s not needed in data entry)  <b>Month:</b> <table><tr><td>01</td><td>January</td><td>07</td><td>July</td></tr><tr><td>02</td><td>February</td><td>08</td><td>August</td></tr><tr><td>03</td><td>March</td><td>09</td><td>September</td></tr><tr><td>04</td><td>April</td><td>10</td><td>October</td></tr><tr><td>05</td><td>May</td><td>11</td><td>November</td></tr><tr><td>06</td><td>June</td><td>12</td><td>December</td></tr></table> <b>Day:</b> 01-31  <b>Year:</b> The year must be 4-digits, i.e.: 2001  UNK    Unknown (either inadequate or no documentation)  NA    Not applicable, no EMS transport				01	January	07	July	02	February	08	August	03	March	09	September	04	April	10	October	05	May	11	November	06	June	12	December
01	January	07	July																									
02	February	08	August																									
03	March	09	September																									
04	April	10	October																									
05	May	11	November																									
06	June	12	December																									
Discussion/Uses	Sequentially enter all the notification dates for each <b>EMS Agency</b> involved in transporting the patient, starting with the first leg of EMS transport.  This data can be found on the EMS Trip Form, Run Sheet or other information from the <b>EMS Agency</b> that transported the patient.																											
EDITS	UT.D5																											
EXPORT FIELD	NOTIFY_DATE																											

**D 6. EMS Respond Time**

Definition	<p>The time the <b>EMS Agency</b> began travel to place where patient EMS transport was to begin.</p> <p>Depending on the EMS transport leg defined by the <b>EMS Origin</b> and <b>EMS Destination</b> points, the place where patient transport began can be at either the scene of injury (SCENE), referring hospital (REF) or rendezvous point (TRANS).</p>
Software Field Name	TIME_OUT
Data Type	Military Time - hh:mm (Multiple entry allowed)
Values	<p>Range: 00:00 to 23:59</p> <p>UNK Unknown (either inadequate or no documentation)</p> <p>NA Not applicable, no EMS transport</p>
Discussion/Uses	<p>Sequentially enter all the respond/departure times for each <b>EMS Agency</b> involved in transporting the patient, starting with the first leg of EMS transport.</p> <p>This data can be found on the EMS Trip Form, Run Sheet or other information from the <b>EMS Agency</b> that transported the patient.</p>
EDITS	UT.D6
EXPORT FIELD	TIME_OUT



**D 7. EMS Respond Date**

Definition	<p>The date the <b>EMS Agency</b> began travel to place where patient EMS transport was to begin.</p> <p>Depending on the EMS transport leg defined by the <b>EMS Origin</b> and <b>EMS Destination</b> points, the place where patient transport began can be at either the scene of injury (SCENE), referring hospital (REF) or rendezvous point (TRANS).</p>																								
Software Field Name	DATE_OUT																								
Data Type	Date - mmddyyyy (Multiple entry allowed)																								
Values	<p>Valid date ("/"s and "-"s not needed in data entry)</p> <p><b>Month:</b></p> <table><tr><td>01</td><td>January</td><td>07</td><td>July</td></tr><tr><td>02</td><td>February</td><td>08</td><td>August</td></tr><tr><td>03</td><td>March</td><td>09</td><td>September</td></tr><tr><td>04</td><td>April</td><td>10</td><td>October</td></tr><tr><td>05</td><td>May</td><td>11</td><td>November</td></tr><tr><td>06</td><td>June</td><td>12</td><td>December</td></tr></table> <p><b>Day:</b> 01-31</p> <p><b>Year:</b> The year must be 4-digits, i.e.: 2001</p> <p>UNK    Unknown (either inadequate or no documentation)</p> <p>NA    Not applicable, no EMS transport</p>	01	January	07	July	02	February	08	August	03	March	09	September	04	April	10	October	05	May	11	November	06	June	12	December
01	January	07	July																						
02	February	08	August																						
03	March	09	September																						
04	April	10	October																						
05	May	11	November																						
06	June	12	December																						
Discussion/Uses	<p>Sequentially enter all the respond/departure dates for each <b>EMS Agency</b> involved in transporting the patient, starting with the first leg of EMS transport.</p> <p>This data can be found on the EMS Trip Form, Run Sheet or other information from the <b>EMS Agency</b> that transported the patient.</p>																								
EDITS	UT.D7																								
EXPORT FIELD	DATE_OUT																								

**D 8. EMS Arrival to Patient Time**

Definition	<p>The time the <b>EMS Agency</b> arrived at the patient to perform EMS transport.</p> <p>Depending on the EMS transport leg defined by the origin and destination point, this can be arrival to the patient at either the scene of injury (SCENE), referring hospital (REF) or rendezvous point (TRANS).</p>
Software Field Name	ARRIVAL_TIME
Data Type	Military Time - hh:mm (Multiple entry allowed)
Values	<p>Range: 00:00 to 23:59</p> <p>UNK Unknown (either inadequate or no documentation)</p> <p>NA Not applicable, no EMS transport</p>
Discussion/Uses	<p>Sequentially enter all the patient arrival times for each <b>EMS Agency</b> involved in transporting the patient, starting with the first leg of EMS transport.</p> <p>This data can be found on the EMS Trip Form, Run Sheet or other information from the <b>EMS Agency</b> that transported the patient.</p>
EDITS	UT.D8
EXPORT_FIELD	ARRIVAL_TIME

**D 9. EMS Arrival to Patient Date**

Definition	<p>The date the <b>EMS Agency</b> arrived at the patient to perform EMS transport.</p> <p>Depending on the EMS transport leg defined by the <b>EMS Origin</b> and <b>EMS Destination</b> points, this can be arrival to the patient at either the scene of injury (SCENE), referring hospital (REF) or rendezvous point (i.e. TRANS).</p>																								
Software Field Name	ARRIVAL_DATE																								
Data Type	Character (Multiple entry allowed)																								
Values	<p>Valid date ("/"s and "-"s not needed in data entry)</p> <p><b>Month:</b></p> <table><tr><td>01</td><td>January</td><td>07</td><td>July</td></tr><tr><td>02</td><td>February</td><td>08</td><td>August</td></tr><tr><td>03</td><td>March</td><td>09</td><td>September</td></tr><tr><td>04</td><td>April</td><td>10</td><td>October</td></tr><tr><td>05</td><td>May</td><td>11</td><td>November</td></tr><tr><td>06</td><td>June</td><td>12</td><td>December</td></tr></table> <p><b>Day:</b> 01-31</p> <p><b>Year:</b> The year must be 4-digits, i.e.: 2001.</p> <p>UNK    Unknown (either inadequate or no documentation)</p> <p>NA    Not applicable, no EMS transport</p>	01	January	07	July	02	February	08	August	03	March	09	September	04	April	10	October	05	May	11	November	06	June	12	December
01	January	07	July																						
02	February	08	August																						
03	March	09	September																						
04	April	10	October																						
05	May	11	November																						
06	June	12	December																						
Discussion/Uses	<p>Sequentially enter all the patient arrival dates for each <b>EMS Agency</b> involved in transporting the patient, starting with the first leg of EMS transport.</p> <p>This data can be found on the EMS Trip Form, Run Sheet or other information from the <b>EMS Agency</b> that transported the patient.</p>																								
EDITS	UT.D9																								
EXPORT FIELD	ARRIVAL DATE																								

**D 10. EMS Departure with Patient Time**

Definition	<p>The time the <b>EMS Agency</b> departed with patient for destination of EMS transport.</p> <p>Depending on the EMS transport leg defined by the <b>EMS Origin</b> and <b>EMS Destination</b> points, this can be departure for the definitive care hospital or rendezvous point, such as a transporting unit, airport, etc.</p>
Software Field Name	DEPARTURE_TIME
Data Type	Military Time - hh:mm (Multiple entry allowed)
Values	<p>Range: 00:00 to 23:59</p> <p>UNK Unknown (either inadequate or no documentation)</p> <p>NA Not applicable, no EMS transport</p>
Discussion/Uses	<p>Sequentially enter all the patient departure times for each <b>EMS Agency</b> involved in transporting the patient, starting with the first leg of EMS transport.</p> <p>This data can be found on the EMS Trip Form, Run Sheet or other information from the <b>EMS Agency</b> that transported the patient.</p>
EDITS	UT.D10
EXPORT FIELD	DEPARTURE_TIME

**D 11. EMS Departure with Patient Date**

**Definition** The date the **EMS Agency** departed with patient for destination of EMS transport.

Depending on the EMS transport leg defined by the **EMS Origin** and **EMS Destination** points, this can be departure for the definitive care hospital or rendezvous point, such as a transporting unit, airport, etc.

**Software Field Name** DEPARTURE\_DATE

**Data Type** Date - mmddyyyy (Multiple entry allowed)

**Values** Valid date ("/"s and "-"s not needed in data entry)

**Month:**

01	January	07	July
02	February	08	August
03	March	09	September
04	April	10	October
05	May	11	November
06	June	12	December

**Day:** 01-31

**Year:** The year must be 4-digits, i.e.: 2001

UNK Unknown (either inadequate or no documentation)

NA Not applicable, no EMS transport

**Discussion/Uses** Sequentially enter all the patient departure dates for each **EMS Agency** involved in transporting the patient, starting with the first leg of EMS transport.

This data can be found on the EMS Trip Form, Run Sheet or other information from the **EMS Agency** that transported the patient.

**EDITS** UT.D11

**EXPORT FIELD** DEPARTURE\_DATE

**D 12. EMS Destination Arrival Time**

Definition	<p>The time the <b>EMS Agency</b> arrived with patient at the destination of EMS transport.</p> <p>Depending on the EMS transport leg defined by the <b>EMS Origin</b> and <b>EMS Destination</b> points, this can be arrival at the definitive care hospital or rendezvous point, such as a transporting unit, airport, etc.</p>
Software Field Name	DESTINATION_ARRIVAL_TIME
Data Type	Military Time - hh:mm (Multiple entry allowed)
Values	<p>Range: 00:00 to 23:59</p> <p>UNK    Unknown (either inadequate or no documentation)</p> <p>NA    Not applicable, no EMS transport</p>
Discussion/Uses	<p>Sequentially enter all the destination arrival times for each <b>EMS Agency</b> involved in transporting the patient, starting with the first leg of EMS transport.</p> <p>This data can be found on the EMS Trip Form, Run Sheet or other information from the <b>EMS Agency</b> that transported the patient.</p>
EDITS	UT.D12
EXPORT FIELD	DESTINATION_ARRIVAL_TIME

**D 13. EMS Destination Arrival Date**

**Definition** The date the **EMS Agency** arrived with patient at the destination of EMS transport.

Depending on the EMS transport leg defined by the **EMS Origin** and **EMS Destination** points, this can be arrival at the definitive care hospital or rendezvous point, such as a transporting unit, airport, etc.

**Software Field Name** DESTINATION\_ARRIVAL\_DATE

**Data Type** Character (Multiple entry allowed)

**Values** Valid date ("/"s and "-"s not needed in data entry)

**Month:**

01	January	07	July
02	February	08	August
03	March	09	September
04	April	10	October
05	May	11	November
06	June	12	December

**Day:** 01-31

**Year:** The year must be 4-digits, i.e.: 2001.

UNK Unknown (either inadequate or no documentation)

NA Not applicable, no EMS transport

**Discussion/Uses** Sequentially enter all the destination arrival dates for each **EMS Agency** involved in transporting the patient, starting with the first leg of EMS transport.

This data can be found on the EMS Trip Form, Run Sheet or other information from the **EMS Agency** that transported the patient.

**EDITS** UT.D13

**EXPORT FIELD** DESTINATION\_ARRIVAL\_DATE

**D 14. EMS Destination**

Definition	The destination where each leg of patient EMS transports ended.
Software Field Name	TRANSPORT_DESTINATION
Data Type	Character (Multiple entry allowed)
Values	<p>Destination/Hospital codes are assigned by the Utah Department of Health. The list of codes can be found in Appendix A—Hospital Codes, page 142. If this leg of EMS transport did not end in a hospital, chose from options 010—090.</p> <p>UNK Unknown (either inadequate or no documentation)</p> <p>NA Not applicable, no EMS transport</p>
Discussion/Uses	<p>Sequentially enter all the destinations where each leg of <b>EMS Agency</b> transport ended, starting with the first destination to which the patient was transported. The last <b>EMS Destination</b> should be the Hospital Code for your hospital, if applicable.</p> <p>This data can be found on the EMS Trip Form, Run Sheet or other information from the <b>EMS Agency</b> that transported the patient.</p>
EDITS	UT.D14; UT.D14S
EXPORT FIELD	TRANSPORT_DESTINATION_SRC



**D 15. EMS Trip Form Received**

Definition	Indicates whether the EMS Trip Form or Run Sheet is available in the medical record (for the trauma registrar/data abstractor) for each leg of an <b>EMS Agency</b> patient transport.	
Software Field Name	TRIP_FORM	
Data Type	Character (Multiple entry allowed)	
Values	Y	Yes, trip form is available.
	N	No, trip form is not available.
	UNK	Unknown
	NA	Not applicable, no EMS transport
Discussion/Uses	This is used to indicate the availability of data for the trauma registry from the EMS Trip Form or Run Sheet for each leg of an <b>EMS Agency</b> patient transport.	
EDITS	UT.D15; UT.D15S	
EXPORT FIELD	TRIP_FORM_SRC	

**D 16. Scene Pulse Rate**

Definition	The first palpable pulse rate expressed as number per minute initially assessed upon arrival at the scene of injury.
Software Field Name	P1
Data Type	Character (Single entry allowed)
Values	Range: 0—400  NOT Not assessed per documentation  UNK Unknown (either inadequate or no documentation)  NA Not applicable, no scene EMS
Discussion/Uses	This measure should be in the first set of vital signs recorded upon arrival at the scene of injury.  This data can be found on the EMS Trip Form, Run Sheet or other information from the <b>EMS Agency</b> .
EDITS	UT.D16
EXPORT FIELD	PULSE / VS_NUMBER / VS_LOCATION_CODE (55/166/65)

**D 17. Scene Respiratory Rate**

Definition	The first unassisted patient respiratory rate expressed as number per minute initially assessed upon arrival at the scene of injury.
Software Field Name	RR1
Data Type	Character (Single entry allowed)
Values	<p>Range: 0—100 (Do not report ranges.)</p> <p>*If patient is apneic prior to intervention, record as 0.</p> <p>ASSIST Unassisted rate is not measurable due to sedation, paralysis or assisted ventilation (including bag-valve-mask and EOA).</p> <p>NOT Not assessed (reason other than ASSIST) per documentation</p> <p>UNK Unknown (either inadequate or no documentation)</p> <p>NA Not applicable, no scene EMS</p>
Discussion/Uses	<p>This measure should be in the first set of vital signs recorded within fifteen minutes of each other upon arrival at the scene of injury. If it is not done in this time period, record NOT.</p> <p>This data can be found on the EMS Trip Form, Run Sheet or other information from the <b>EMS Agency</b> that transported the patient.</p> <p>The trauma registry software uses values entered in this field to calculate the Revised Trauma Score. See Appendix D—Calculating Revised Trauma Score, page 148.</p>
EDITS	UT.D17
EXPORT FIELD	RESP_RATE / VS_NUMBER / VS_LOCATION_CODE (56/166/65)

**D 18. Scene Systolic Blood Pressure**

**Definition** The systolic blood pressure initially assessed upon arrival at the scene of injury.

**Software Field Name** SBP1

**Data Type** Character (Single entry allowed)

**Values** Range: 0—300

NOT Not assessed per documentation

UNK Unknown (either inadequate or no documentation)

NA Not applicable, no scene EMS

**Discussion/Uses** This measure should be in the first set of vital signs recorded within fifteen minutes of each other upon arrival at the scene of injury. If it is not done in this time period, record NOT.

This data can be found on the EMS Trip Form, Run Sheet or other information from the **EMS Agency** that transported the patient.

The trauma registry software uses values entered in this field to calculate the Revised Trauma Score. See Appendix D—Calculating Revised Trauma Score, page 148.

**EDITS** UT.D18

**EXPORT FIELD** SYS\_BP / VS\_NUMBER / VS\_LOCATION\_CODE (56/166/65)

**D 19. Scene Eye Opening Response**

Definition	The first assessment of eye opening response for the Glasgow Coma Score upon arrival at the scene of injury.
Software Field Name	EYE1
Data Type	Character (Single entry allowed)
Values	<p>Range: 1—4</p> <p>(*For the purposes of this data element, a pediatric patient is defined as a person &lt;50 kg or 10 years of age and younger.)</p> <p><u>Pediatric</u> eye opening response</p> <p>1 No eye opening</p> <p>2 Eye opening to pain</p> <p>3 Eye opening to verbal command</p> <p>4 Eyes open spontaneously</p> <p><u>Adult</u> eye opening response</p> <p>1 No eye opening</p> <p>2 Eye opening to pain</p> <p>3 Eye opening to verbal command</p> <p>4 Eyes open spontaneously</p> <hr/> <p>NOT Not assessed per documentation</p> <p>UNK Unknown (either inadequate or no documentation)</p> <p>NA Not applicable, no scene EMS</p>
Discussion/Uses	<p>This measure should be in the first set of vital signs recorded within fifteen minutes of each other upon arrival at the scene of injury. If it is not done in this time period, record NOT.</p> <p>This data can be found on the EMS Trip Form, Run Sheet or other information from the <b>EMS Agency</b> that transported the patient.</p> <p>The trauma registry software uses values entered in this field to calculate the Revised Trauma Score. See Appendix D—Calculating Revised Trauma Score, page 148.</p>
EDITS	UT.D19
EXPORT FIELD	EYE_OPENING / VS_NUMBER / VS_LOCATION_CODE (59/166/65)

**D 20. Scene Verbal Response**

Definition	The first assessment of verbal response for the Glasgow Coma Score upon arrival at the scene of injury.
Software Field Name	VERBAL1
Data Type	Character (Single entry allowed)
Values	<p>Range: 1—5</p> <p>*If the patient is intubated and deeply comatose, enter 1. If an intubated patient can respond appropriately, the provider may gauge the responses and assign a 1 (none) to 5 (oriented).</p> <p><u>Pediatric</u> verbal response</p> <p>(*For the purposes of this data element, a pediatric patient is defined as a person &lt;50 kg or 10 years of age and younger.)</p> <p>1 No vocal response</p> <p>2 Inconsolable, agitated</p> <p>3 Inconsistently consolable, moaning</p> <p>4 Cries but is consolable, inappropriate interactions</p> <p>5 Smiles, oriented to sounds, follows objects, interacts</p> <p><u>Adult</u> verbal response</p> <p>1 No verbal response</p> <p>2 Incomprehensible sounds; moaning</p> <p>3 Inappropriate words</p> <p>4 Confused</p> <p>5 Oriented</p> <hr/> <p>NOT Not assessed per documentation</p> <p>UNK Unknown (either inadequate or no documentation)</p> <p>NA Not applicable, no scene EMS</p>
Discussion/Uses	<p>This measure should be in the first set of vital signs recorded within fifteen minutes of each other upon arrival at the scene of injury. If it is not done in this time period, record NOT.</p> <p>This data can be found on the EMS Trip Form, Run Sheet or other information from the <b>EMS Agency</b> that transported the patient.</p> <p>The trauma registry software uses values entered in this field to calculate the Revised Trauma Score. See Appendix D—Calculating Revised Trauma Score, page 148.</p>
EDITS	UT.D20
EXPORT FIELD	VERBAL_RESPONSE / VS_NUMBER / VS_LOCATION_CODE (61/166/65)

**D 21. Scene Motor Response**

Definition	First assessment of motor response for the Glasgow Coma Score upon arrival at the scene of injury.
Software Field Name	MOTOR1
Data Type	Character (Single entry allowed)
Values	<p>Range: 1—6</p> <p>*An appropriate response for a quadriplegic may be shrugging shoulders or purposeful movement on command.</p> <p><u>Pediatric</u> motor response</p> <p>(*For the purposes of this data element, a pediatric patient is defined as a person &lt;50 kg or 10 years of age and younger.)</p> <p>1 No motor response</p> <p>2 Extension to pain</p> <p>3 Flexion to pain</p> <p>4 Withdrawal from pain</p> <p>5 Localizing pain</p> <p>6 Obeys commands with appropriate motor response</p> <p><u>Adult</u> motor response</p> <p>1 No motor response</p> <p>2 Extension to pain</p> <p>3 Flexion to pain</p> <p>4 Withdrawal from pain</p> <p>5 Localizing pain</p> <p>6 Obeys commands with appropriate motor response</p> <hr/> <p>NOT Not assessed per documentation</p> <p>UNK Unknown (either inadequate or no documentation)</p> <p>NA Not applicable, no scene EMS</p>
Discussion/Uses	<p>This measure should be in the first set of vital signs recorded within fifteen minutes of each other upon arrival at the scene of injury. If it is not done in this time period, record NOT.</p> <p>This data can be found on the EMS Trip Form, Run Sheet or other information from the <b>EMS Agency</b> that transported the patient.</p> <p>The trauma registry software uses values entered in this field to calculate the Revised Trauma Score. See Appendix D—Calculating Revised Trauma Score, page 148.</p>
EDITS	UT.D21
EXPORT FIELD	MOTOR_RESPONSE / VS_NUMBER / VS_LOCATION_CODE (62/166/65)

**D 22. Scene Eye Opening Response GCS Qualifier (Eye Obstruction)**

Definition	A flag used to indicate if patient is experiencing some obstruction to the eye that would hinder the first assessment of the Glasgow Coma Score upon arrival at the scene of injury.	
Software Field Name	EYE_STATUS_SCENE	
Data Type	Character (Single entry allowed)	
Values	Y	Yes, patient had eye obstruction.
	N	No indication that patient had eye obstruction.
	UNK	Unknown (either inadequate or no documentation)
	NA	Not applicable, no scene EMS
Discussion/Uses	This data can be found on the EMS Trip Form, Run Sheet or other information from the <b>EMS Agency</b> that transported the patient.	
EDITS	UT.D22	
EXPORT FIELD	EYE_STATUS / VS_NUMBER / VS_LOCATION_CODE (734/166/65)	



**D 23. Scene Verbal Response GCS Qualifier (Intubated)**

Definition	A flag used to indicate if patient was intubated at the time of first assessment of the Glasgow Coma Score upon arrival at the scene of injury.		
Software Field Name	VERBAL_STATUS_SCENE		
Data Type	Character (Single entry allowed)		
Values	Y	Yes, patient intubated.	
	N	No indication that patient intubated.	
	UNK	Unknown (either inadequate or no documentation)	
	NA	Not applicable, no scene EMS	
Discussion/Uses	This data can be found on the EMS Trip Form, Run Sheet or other information from the <b>EMS Agency</b> that transported the patient.		
EDITS	UT.D23		
EXPORT FIELD	VERBAL_STATUS / VS_NUMBER / VS_LOCATION_CODE (735/166/65)		

**D 24. Scene Motor Response GCS Qualifier (Chemically Paralyzed)**

Definition	A flag used to indicate if patient was chemically paralyzed at the time of first assessment of the Glasgow Coma Score upon arrival at the scene of injury.	
Software Field Name	MOTOR_STATUS_SCENE	
Data Type	Character (Single entry allowed)	
Values	Y	Yes, patient was chemically paralyzed.
	N	No indication that patient was chemically paralyzed.
	UNK	Unknown (either inadequate or no documentation)
	NA	Not applicable, no scene EMS
Discussion/Uses	This data can be found on the EMS Trip Form, Run Sheet or other information from the <b>EMS Agency</b> that transported the patient.	
EDITS	UT.D24	
EXPORT FIELD	MOTOR_STATUS / VS_NUMBER / VS_LOCATION_CODE (736/166/65)	

**D 25. Scene Glasgow Coma Score Total**

Definition	The severity of injury as reflected by the first assessment of total GCS upon arrival at the scene of injury.
Software Field Name	GLASCOW1
Data Type	Character (Single entry allowed)
Values	<p>Range: 3—15</p> <p>If "A &amp; O X 3" or "A &amp; O X 4" is documented in medical chart, record GCS as 15.</p> <p>UNK    Unknown (either inadequate or no documentation)</p> <p>NOT    Not assessed per documentation</p> <p>NA    Not applicable, no scene EMS</p>
Discussion/Uses	<p>This measure should be in the first set of vital signs recorded within fifteen minutes of each other upon arrival at the scene of injury. If it is not done in this time period, record NOT.</p> <p>This data can be found on the EMS Trip Form, Run Sheet or other information from the <b>EMS Agency</b> that transported the patient.</p> <p>The trauma registry software uses values entered in this field to calculate the Revised Trauma Score. See Appendix D—Calculating Revised Trauma Score, page 148.</p>
EDITS	UT.D25
EXPORT FIELD	GLASCOW / VS_NUMBER / VS_LOCATION_CODE (164/166/65)

**D 26. Scene Airway Management**

Definition	Describes the airway resuscitation procedures performed upon arrival at the scene of injury.
Software Field Name	SCENE_AIRWAY
Data Type	Character (Single entry allowed)
Values	<p>*Select the most invasive airway procedure successfully performed.</p> <p>ATT    Attempted and documented unsuccessful</p> <p>BM     Bag and mask</p> <p>CRIC   Cricothyrotomy</p> <p>EOA    Esophageal obturator</p> <p>NASO   Nasopharyngeal airway</p> <p>NETT   Nasal ETT</p> <p>ORAL   Oral airway</p> <p>OETT   Oral ETT</p> <p>TRACH Tracheostomy</p> <p>NONE   Oxygen administration or nasal canula only</p> <p>NOT    Not performed per documentation (other than NONE)</p> <p>UNK    Unknown (either inadequate or no documentation)</p> <p>NA     Not applicable, no scene EMS</p>
Discussion/Uses	This data can be found on the EMS Trip Form, Run Sheet or other information from the <b>EMS Agency</b> that transported the patient.
EDITS	UT.D26 (Pass)
EXPORT FIELD	PROCEDURE_CODE_SRC / PROCEDURE_LOCATION_CODE / PROCEDURE_RESULT (129/118/115)

**D 27.                      Scene CPR**

Definition	Identifies if CPR was performed upon arrival in the scene.
Software Field Name	SCENE_CPR
Data Type	Character (Single entry allowed)
Values	Y        Yes, CPR performed. N        No, CPR not performed per documentation. UNK     Unknown (either inadequate or no documentation) NA       Not applicable, no scene EMS
Discussion/Uses	This data can be found on the EMS Trip Form, Run Sheet or other information from the <b>EMS Agency</b> that transported the patient.
EDITS	UT.D27 (Pass)
EXPORT FIELD	PROCEDURE_CODE_SRC / PROCEDURE_LOCATION_CODE / PROCEDURE_RESULT (129/118/115)

**D 28. Scene Fluids Administered**

Definition	Describes the volume of fluids administered upon arrival in the scene.
Software Field Name	SCENE_FLUIDS
Data Type	Character (Single entry allowed)
Values	<p><u>Pediatrics</u></p> <p>(*For the purposes of this data element, a pediatric patient is defined as a person &lt;50 kg or 10 years of age and younger.)</p> <p>&lt;20            Less than 20cc/kg administered</p> <p>20-40        20 to 40cc/kg administered</p> <p>&gt;40           Greater than 40cc/kg administered</p> <p>IVF.UNK      IV fluids: unknown amount</p> <p><u>Adults</u></p> <p>&lt;500        Less than 500 ml administered</p> <p>500-2000    500 to 2000 ml administered</p> <p>&gt;2000       Greater than 2000 ml administered</p> <p>IVF.UNK      IV fluids: unknown amount</p> <hr/> <p>NOT           Not performed per documentation</p> <p>UNK           Unknown (either inadequate or no documentation)</p> <p>NA            Not applicable, no scene EMS</p>
Discussion/Uses	This data can be found on the EMS Trip Form, Run Sheet or other information from the <b>EMS Agency</b> that transported the patient.
EDITS	UT.D28 (Pass)
EXPORT FIELD	PROCEDURE_CODE_SRC / PROCEDURE_LOCATION_CODE / PROCEDURE_RESULT (129/118/115)

## **E. Hospital Data**

**E 1. Admit Type**

Definition	The specific type of patient admission at your hospital.	
Software Field Name	ADMIT_TYPE	
Data Type	Character (Single entry allowed)	
Values	E	Admitted through ED
	D	Direct admission
	T	Seen in ED then transferred out by EMS
	R	Seen in ED then released or referred POV
	X	Died in ED or DOA
Discussion/Uses	None	
EDITS	UT.E1	
EXPORT FIELD	ADMIT_TYPE (198)	



**E 2. Admit Service**

Definition	The specific service to which the patient is admitted after discharge from the ED.
Software Field Name	ADMIT_SVC
Data Type	Character (Single entry allowed)
Values	<p>BURN Burn service</p> <p>NSR Neurosurgery</p> <p>OB Obstetrics</p> <p>ORTHO Orthopedic surgery</p> <p>PED Pediatric service</p> <p>PSYCH Psychiatric</p> <p>TS Trauma Service (only organized Trauma Service or designated Trauma Center)</p> <p>SURG General surgery or other surgical service not listed</p> <p>MED Other medical service not listed</p> <p>UNK Unknown (either inadequate or no documentation)</p> <p>NA Not applicable, patient seen in ED only (<b>ED Discharge Disposition</b> = 'HOME', 'HOSP', 'D', 'DOA' or 'NA')</p>
Discussion/Uses	
EDITS	UT.E2; UT.E2S; UT.E2SV
EXPORT FIELD	ADM_SVC_SRC (221)

**E 3. Hospital Arrival Time**

Definition	The time the patient physically <u>arrived</u> at your hospital (passed through the doors and was checked in).
Software Field Name	HOSPITAL_ARRIVAL_TIME
Data Type	Military Time - hh:mm (Single entry allowed)
Values	Range: 00:00 to 23:59  UNK Unknown (either inadequate or no documentation)
Discussion/Uses	This time may or may not coincide with the first time a patient was seen by medical personnel, the <b>ED Admission Time</b> . For example, the patient was dropped off by EMS Agency at 23:45 12/01/2001 ( <b>Hospital Arrival Time</b> = 23:45) but was not triaged or seen by medical personnel until 00:10 12/02/2001 ( <b>ED Admission Time</b> = 00:10).
EDITS	UT.E3
EXPORT FIELD	HOSPITAL_ARRIVAL_TIME (31)

**E 4. Hospital Arrival Date**

Definition	The date the patient physically <u>arrived</u> at your hospital (passed through the doors and was checked in).			
Software Field Name	HOSPITAL_ARRIVAL_DATE			
Data Type	Date - mmddyyyy (Single entry allowed)			
Values	Valid date ("/"s and "-"s not needed in data entry)			
	Month:			
	01	January	07	July
	02	February	08	August
	03	March	09	September
	04	April	10	October
	05	May	11	November
	06	June	12	December
	Day: 01-31			
	Year: The year must be 4-digits, i.e.: 2001.			
	UNK	Unknown (either inadequate or no documentation)		
Discussion/Uses	This date may or may not coincide with the first date the patient was seen by medical personnel, the <b>ED Admission Date</b> . For example, the patient was dropped off by EMS Agency at 23:45 12/01/2001 ( <b>Hospital Arrival Date</b> = 12/01/2001) but was not triaged or seen by medical personnel until 00:10 12/02/2001 ( <b>ED Admission Date</b> = 12/02/2001).			
EDITS	UT.E4			
EXPORT FIELD	HOSPITAL_ARRIVAL_DATE (32)			

**E 5. ED Admission Time**

Definition	The time the patient was triaged or seen by medical personnel at your emergency department.
Software Field Name	ED_ADM_TIME
Data Type	Military Time - hh:mm (Single entry allowed)
Values	Range: 00:00 to 23:59  UNK Unknown (either inadequate or no documentation)  NA Not applicable, not an ED patient at your hospital
Discussion/Uses	This time may or may not coincide with the <b>Hospital Arrival Time</b> . For example, the patient was dropped off by EMS Agency at 23:45 12/01/2001 but was not triaged or seen by medical personnel until 00:10 12/02/2001. ( <b>Hospital Arrival Time</b> = 23:45 and <b>ED Admission Time</b> = 00:10.)
EDITS	UT.E5
EXPORT FIELD	ED_ADM_TIME (470)

**E 6. ED Admission Date**

Definition	The date the patient was triaged or seen by medical personnel at your emergency department.			
Software Field Name	ED_ADM_DATE			
Data Type	Date – mmddyyyy (Single entry allowed)			
Values	Valid date ("/"s and "-"s not needed in data entry)			
	Month:			
	01	January	07	July
	02	February	08	August
	03	March	09	September
	04	April	10	October
	05	May	11	November
	06	June	12	December
	Day: 01-31			
	Year: The year must be 4-digits, i.e.: 2001.			
	UNK	Unknown (either inadequate or no documentation)		
	NA	Not applicable, not an ED patient at your hospital		
Discussion/Uses	This time may or may not coincide with the <b>Hospital Arrival Date</b> . For example, the patient was dropped off by EMS Agency at 23:45 12/01/2001 but was not triaged or seen by medical personnel until 00:10 12/02/2001. ( <b>Hospital Arrival Date</b> = 12/01/2001 and <b>ED Admission Date</b> = 12/02/2001)			
EDITS	UT.E6			
EXPORT FIELD	ED_ADM_DATE (469)			

**E 7. ED Discharge Time**

Definition	The time the patient died, was discharged, or was transferred from your emergency department.
Software Field Name	ED_DC_TIME
Data Type	Military Time - hh:mm (Single entry allowed)
Values	Range: 00:00 to 23:59 UNK Unknown (either inadequate or no documentation) NA Not applicable, not an ED patient at your hospital
Discussion/Uses	None
EDITS	UT.E7
EXPORT FIELD	ED_DC_TIME (261)

**E 8. ED Discharge Date**

**Definition** The date the patient died, was discharged, or was transferred from your emergency department.

**Software Field Name** ED\_DC\_DATE

**Data Type** Date – mmddyyyy (Single entry allowed)

**Values** Valid date ("/"s and "-"s not needed in data entry)

**Month:**

01	January	07	July
02	February	08	August
03	March	09	September
04	April	10	October
05	May	11	November
06	June	12	December

**Day:** 01-31

**Year:** The year must be 4-digits, i.e.: 2001.

UNK Unknown (either inadequate or no documentation)

NA Not applicable, not an ED patient at your hospital

**Discussion/Uses** None

**EDITS** UT.E8

**EXPORT FIELD** ED\_DC\_DATE (262)

**E 9. Inpatient Admission Time**

Definition	The time the patient was admitted as an inpatient to your hospital.
Software Field Name	HOSPITAL_ADMISSION_TIME
Data Type	Military Time - hh:mm (Single entry allowed)
Values	Range: 00:00 to 23:59  UNK Unknown (either inadequate or no documentation)  NA Not applicable, not an inpatient at your hospital
Discussion/Uses	This time may or may not coincide with the <b>Hospital Arrival Time</b> . For example, the patient was dropped off by EMS Agency at 23:45 12/01/2001 but was not admitted as an inpatient until 00:10 12/02/2001. ( <b>Hospital Arrival Time</b> = 23:45 and <b>Inpatient Admission Time</b> = 00:10)
EDITS	UT.E9
EXPORT FIELD	HOSPITAL_ADMISSION_TIME (300)



**E 10. Inpatient Admission Date**

**Definition** The date the patient was admitted as an inpatient to your hospital.

**Software Field Name** HOSPITAL\_ADMISSION\_DATE

**Data Type** Date – mmddyyyy (Single entry allowed)

**Values** Valid date ("/"s and "-"s not needed in data entry)

Month:

01	January	07	July
02	February	08	August
03	March	09	September
04	April	10	October
05	May	11	November
06	June	12	December

Day: 01-31

Year: The year must be 4-digit s ex:2001.

UNK Unknown (either inadequate or no documentation)

NA Not applicable, not an inpatient at your hospital

**Discussion/Uses** This time may or may not coincide with the **Hospital Arrival Date**. For example, the patient was dropped off by EMS Agency at 23:45 12/01/2001 but was not admitted as an inpatient until 00:10 12/02/2001. (**Hospital Arrival Date** = 12/01/2001 and **Inpatient Admission Date** = 12/02/2001)

**EDITS** UT.E10

**EXPORT FIELD** HOSPITAL\_ADMISSION\_DATE (247)

**E 11. Inpatient Discharge Time**

Definition	The time the patient died, was discharged, or was transferred from your hospital.
Software Field Name	DISCHARGE_TIME
Data Type	Time – hh:mm (Single entry allowed)
Values	Range: 00:00 to 23:59.  UNK Unknown (either inadequate or no documentation)  NA Not applicable, not an inpatient at your hospital
Discussion/Uses	None
EDITS	UT.E11
EXPORT FIELD	HOSPITAL_DEPARTURE_TIME (144)

**E 12. Inpatient Discharge Date**

Definition	The date the patient died, was discharged, or was transferred from your hospital.			
Software Field Name	DISCHARGE_DATE			
Data Type	Date - mmddyyyy (Single entry allowed)			
Values	Valid date ("/"s and "-"s not needed in data entry)			
	Month:			
	01	January	07	July
	02	February	08	August
	03	March	09	September
	04	April	10	October
	05	May	11	November
	06	June	12	December
	Day: 01-31			
	Year: The year must be 4-digits, i.e.: 2001.			
	UNK	Unknown (either inadequate or no documentation)		
	NA	Not applicable, not an inpatient at your hospital		
Discussion/Uses	None			
EDITS	UT.E12			
EXPORT FIELD	HOSPITAL_DEPARTURE_DATE (143)			

**E 13. ED/Inpatient Pulse Rate**

Definition	The first palpable pulse rate expressed as number per minute initially assessed upon arrival in the ED (or hospital for direct admit patients).
Software Field Name	P2
Data Type	Character (Single entry allowed)
Values	Range: 0—400  NOT Not assessed per documentation  UNK Unknown (either inadequate or no documentation)  NA Not applicable, not an ED/inpatient at your hospital
Discussion/Uses	This measure should be in the first set of vital signs recorded within fifteen minutes of each other upon arrival in your hospital (ED or inpatient admit). If it is not done in this time period, record NOT.
EDITS	UT.E13
EXPORT FIELD	PULSE / VS_LOCATION_CODE / VS_NUMBER (55/166/65)

**E 14. ED/Inpatient Respiratory Rate**

Definition	The first unassisted patient respiratory rate expressed as number per minute initially assessed upon arrival in the ED (or hospital for direct admit patients).
Software Field Name	RR2
Data Type	Character (Single entry allowed)
Values	<p>Range: 0—100</p> <p>*If patient is apneic prior to intervention, record as 0.</p> <p>ASSIST Unassisted rate is not measurable due to sedation, paralysis or assisted ventilation (including bag-valve-mask and EOA).</p> <p>NOT Not assessed (reason other than ASSIST) per documentation</p> <p>UNK Unknown (either inadequate or no documentation)</p> <p>NA Not applicable, not an ED/inpatient at your hospital</p>
Discussion/Uses	<p>This measure should be in the first set of vital signs recorded within fifteen minutes of each other upon arrival in your hospital (ED or inpatient admit). If it is not done in this time period, record NOT.</p> <p>The trauma registry software uses values entered in this field to calculate the Revised Trauma Score. See Appendix D—Calculating Revised Trauma Score, page 148.</p>
EDITS	UT.E14
EXPORT FIELD	RESP_RATE / VS_LOCATION_CODE / VS_NUMBER (53/166/65)

**E 15. ED/Inpatient Systolic Blood Pressure**

Definition	The systolic blood pressure initially assessed upon arrival in the ED (or hospital for direct admit patients).
Software Field Name	SBP2
Data Type	Character (Single entry allowed)
Values	Range: 0—300  NOT Not assessed per documentation  UNK Unknown (either inadequate or no documentation)  NA Not applicable, not an ED/inpatient at your hospital
Discussion/Uses	<p>This measure should be in the first set of vital signs recorded within fifteen minutes of each other upon arrival in your hospital (ED or inpatient admit). If it is not done in this time period, record NOT.</p> <p>The trauma registry software uses values entered in this field to calculate the Revised Trauma Score. See Appendix D—Calculating Revised Trauma Score, page 148.</p>
EDITS	UT.E15
EXPORT FIELD	SYS_BP / VS_LOCATION_CODE / VS_NUMBER (56/166/65)

**E 16. ED/Inpatient Eye Opening Response**

Definition	The first assessment of eye opening for the Glasgow Coma Score upon arrival in the ED (or hospital for direct admit patients).
Software Field Name	EYE2
Data Type	Character (Single entry allowed)
Values	<p>Range: 1—4</p> <p><u>Pediatric</u> eye opening response</p> <p>(*For the purposes of this data element, a pediatric patient is defined as a person &lt;50 kg or 10 years of age and younger.)</p> <p>1 No eye opening</p> <p>2 Eye opening to pain</p> <p>3 Eye opening to verbal command</p> <p>4 Eyes open spontaneously</p> <p><u>Adult</u> eye opening response</p> <p>1 No eye opening</p> <p>2 Eye opening to pain</p> <p>3 Eye opening to verbal command</p> <p>4 Eyes open spontaneously</p> <hr/> <p>NOT Not assessed per documentation</p> <p>UNK Unknown (either inadequate or no documentation)</p> <p>NA Not applicable, not an ED/inpatient at your hospital</p>
Discussion/Uses	<p>This measure should be in the first set of vital signs recorded within fifteen minutes of each other upon arrival in your hospital (ED or inpatient admit). If it is not done in this time period, record NOT.</p> <p>The trauma registry software uses values entered in this field to calculate the Revised Trauma Score. See Appendix D—Calculating Revised Trauma Score, page 148.</p>
EDITS	UT.E16
EXPORT FIELD	EYE_OPENING / VS_LOCATION_CODE / VS_NUMBER (59/166/65)

**E 17. ED/Inpatient Verbal Response**

Definition	The first assessment of verbal response for the Glasgow Coma Score upon arrival in the ED (or hospital for direct admit patients).
Software Field Name	VERBAL2
Data Type	Character (Single entry allowed)
Values	<p>Range: 1—5</p> <p>*If the patient is intubated and deeply comatose, enter 1. If an intubated patient can respond appropriately, the provider may gauge the responses and assign a 1 (none) to 5 (oriented).</p> <p><u>Pediatric</u> verbal response</p> <p>(*For the purposes of this data element, a pediatric patient is defined as a person &lt;50 kg or 10 years of age and younger.)</p> <p>1 No vocal response</p> <p>2 Inconsolable, agitated</p> <p>3 Inconsistently consolable, moaning</p> <p>4 Cries but is consolable, inappropriate interactions</p> <p>5 Smiles, oriented to sounds, follows objects, interacts</p> <p><u>Adult</u> verbal response</p> <p>1 No verbal response</p> <p>2 Incomprehensible sounds; moaning</p> <p>3 Inappropriate words</p> <p>4 Confused</p> <p>5 Oriented</p> <hr/> <p>NOT Not assessed per documentation</p> <p>UNK Unknown (either inadequate or no documentation)</p> <p>NA Not applicable, not an ED/inpatient at your hospital</p>
Discussion/Uses	<p>This measure should be in the first set of vital signs recorded within fifteen minutes of each other upon arrival in your hospital (ED or inpatient admit). If it is not done in this time period, record NOT.</p> <p>The trauma registry software uses values entered in this field to calculate the Revised Trauma Score. See Appendix D—Calculating Revised Trauma Score, page 148.</p>
EDITS	UT.E17
EXPORT FIELD	VERBAL_RESPONSE / VS_LOCATION_CODE / VS_NUMBER (61/166/65)



**E 18. ED/Inpatient Motor Response**

Definition	The first assessment of motor response for the Glasgow Coma Score upon arrival in the ED (or hospital for direct admit patients).
Software Field Name	MOTOR2
Data Type	Character (Single entry allowed)
Values	<p>Range: 1—6</p> <p>*An appropriate response for a quadriplegic may be shrugging shoulders or purposeful movement on command.</p> <p><u>Pediatric</u> motor response</p> <p>(*For the purposes of this data element, a pediatric patient is defined as a person &lt;50 kg or 10 years of age and younger.)</p> <p>1 No motor response</p> <p>2 Extension to pain</p> <p>3 Flexion to pain</p> <p>4 Withdrawal from pain</p> <p>5 Localizing pain</p> <p>6 Obeys commands with appropriate motor response</p> <p><u>Adult</u> motor response</p> <p>1 No motor response</p> <p>2 Extension to pain</p> <p>3 Flexion to pain</p> <p>4 Withdrawal from pain</p> <p>5 Localizing pain</p> <p>6 Obeys commands with appropriate motor response</p> <hr/> <p>NOT Not assessed per documentation</p> <p>UNK Unknown (either inadequate or no documentation)</p> <p>NA Not applicable, not an ED/inpatient at your hospital</p>
Discussion/Uses	<p>This measure should be in the first set of vital signs recorded within fifteen minutes of each other upon arrival in your hospital (ED or inpatient admit). If it is not done in this time period, record NOT.</p> <p>The trauma registry software uses values entered in this field to calculate the Revised Trauma Score. See Appendix D—Calculating Revised Trauma Score, page 148.</p>
EDITS	UT.E18
EXPORT FIELD	MOTORL_RESPONSE / VS_LOCATION_CODE / VS_NUMBER (62/166/65)

**E 19. ED/Inpatient Eye Opening Response GCS Qualifier (Eye Obstruction)**

Definition	A flag used to indicate if patient is experiencing some obstruction to the eye that would hinder the first assessment of the Glasgow Coma Score upon arrival in the ED (or hospital for direct admit patients).
Software Field Name	EYE_STATUS_ED
Data Type	Character (Single entry allowed)
Values	Y Yes, patient had eye obstruction. N No indication that patient had eye obstruction. UNK Unknown (either inadequate or no documentation) NA Not applicable, not an ED/inpatient at your hospital
Discussion/Uses	
EDITS	UT.E19
EXPORT FIELD	EYE_STATUS / VS_LOCATION_CODE / VS_NUMBER (734/166/65)

**E 20. ED/Inpatient Verbal Response GCS Qualifier (Intubated)**

Definition	A flag used to indicate if patient was intubated at the time of first assessment of the Glasgow Coma Score upon arrival in the ED (or hospital for direct admit patients).		
Software Field Name	VERBAL_STATUS_ED		
Data Type	Character (Single entry allowed)		
Values	Y	Yes, patient intubated.	
	N	No indication that patient intubated.	
	UNK	Unknown (either inadequate or no documentation)	
	NA	Not applicable, not an ED/inpatient at your hospital	
Discussion/Uses			
EDITS	UT.E20		
EXPORT FIELD	MOTOR_STATUS / VS_LOCATION_CODE / VS_NUMBER (735/166/65)		

**E 21. ED/Inpatient Motor Response GCS Qualifier (Chemically Paralyzed)**

Definition	A flag used to indicate if patient was chemically paralyzed at the time of first assessment of the Glasgow Coma Score upon arrival in the ED (or hospital for direct admit patients).
Software Field Name	MOTOR_STATUS_ED
Data Type	Character (Single entry allowed)
Values	Y Yes, patient was chemically paralyzed. N No indication that patient was chemically paralyzed. UNK Unknown (either inadequate or no documentation) NA Not applicable, not an ED/inpatient at your hospital
Discussion/Uses	
EDITS	UT.E21
EXPORT FIELD	MOTOR_STATUS / VS_LOCATION_CODE / VS_NUMBER (736/166/65)

**E 22. ED/Inpatient Glasgow Coma Score Total**

Definition	The severity of injury as reflected by the first assessment of total GCS upon arrival in the ED (or hospital for direct admit patients).
Software Field Name	GLASCOW2
Data Type	Character (Single entry allowed)
Values	<p>Range: 3—15</p> <p>If "A &amp; O X 3" or "A &amp; O X 4" is documented in medical chart, record GCS as 15.</p> <p>UNK    Unknown (either inadequate or no documentation)</p> <p>NOT    Not assessed per documentation</p> <p>NA    Not applicable, not an ED/inpatient at your hospital</p>
Discussion/Uses	<p>This measure should be in the first set of vital signs recorded within fifteen minutes of each other upon arrival in your hospital (ED or inpatient admit). If it is not done in this time period, record NOT.</p> <p>The trauma registry software uses values entered in this field to calculate the Revised Trauma Score. See Appendix D—Calculating Revised Trauma Score, page 148.</p>
EDITS	UT.E22 (Only trips if GCS can't be calculated from entered values)
EXPORT FIELD	GLASCOW / VS_LOCATION_CODE / VS_NUMBER (164/166/65)

**E 23. ED/Inpatient Airway Management**

Definition	Describes the airway resuscitation procedures performed upon arrival in the ED (or hospital for direct admit patients).
Software Field Name	ED_AIRWAY
Data Type	Character (Single entry allowed)
Values	<p>*Select the most invasive airway procedure successfully performed.</p> <p>ATT    Attempted and documented unsuccessful</p> <p>BM     Bag and mask</p> <p>CONT   Continued airway management from EMS/referring hospital/scene</p> <p>CRIC   Cricothyrotomy</p> <p>EOA    Esophageal obturator</p> <p>NASO   Nasopharyngeal airway</p> <p>NETT   Nasal ETT</p> <p>ORAL   Oral airway</p> <p>OETT   Oral ETT</p> <p>TRACH Tracheostomy</p> <p>NONE   Oxygen administration or nasal cannula only</p> <p>NOT    Not performed per documentation</p> <p>UNK    Unknown (either inadequate or no documentation)</p> <p>NA      Not applicable, not an ED/inpatient at your hospital</p>
Discussion/Uses	Fill in the first set of procedures performed upon arrival in your hospital (ED or inpatient admit). If it is not done upon arrival, record NOT.
EDIT	UT.E23 (Pass)
EXPORT FIELD	PROCEDURE_CODE_SRC / PROCEDURE LOCATION CODE / PROCEDURE_RESULT (129/118/115)

**E 24. ED/Inpatient CPR**

Definition	Identifies if CPR was performed upon arrival in the ED (or hospital for direct admit patients).	
Software Field Name	ED_CPR	
Data Type	Character (Single entry allowed)	
Values	Y	Yes, CPR performed.
	N	No, CPR not performed per documentation.
	UNK	Unknown (either inadequate or no documentation)
	NA	Not applicable, not an ED/inpatient at your hospital
Discussion/Uses	Fill in the first set of procedures performed upon arrival in your hospital (ED or inpatient admit). If it is not done upon arrival, record NOT.	
EDIT	UT.E24 (Pass)	
EXPORT FIELD	PROCEDURE_CODE_SRC / PROCEDURE LOCATION CODE / PROCEDURE_RESULT (129/118/115)	

**E 25. ED/Inpatient Fluids Administered**

Definition	Describes the volume of fluids administered upon arrival in the ED (or hospital for direct admit patients).
Software Field Name	ED_FLUIDS
Data Type	Character (Single entry allowed)
Values	Includes normal saline, dextrose, lactated ringers, and cryoprecipitate.  <u>Pediatrics</u> (*For the purposes of this data element, a pediatric patient is defined as a person <50 kg or 10 years of age and younger.) <20            Less than 20cc/kg administered 20-40           20 to 40cc/kg administered >40            Greater than 40cc/kg administered IVF.UNK       IV fluids: unknown amount  <u>Adults</u> <500           Less than 500 ml administered 500-2000       500 to 2000 ml administered >2000           Greater than 2000 ml administered IVF.UNK       IV fluids: unknown amount  <hr/> NOT            Not performed per documentation UNK            Unknown (either inadequate or no documentation) NA              Not applicable, not an ED/inpatient at your hospital
Discussion/Uses	Fill in the first set of procedures performed upon arrival in your hospital (ED or inpatient admit). If it is not done upon arrival, record NOT.
EDIT	UT.E25 (Pass)
EXPORT FIELD	PROCEDURE_CODE_SRC / PROCEDURE LOCATION CODE / PROCEDURE_RESULT (129/118/115)



**E 26. ED/Inpatient Blood Given**

Definition	Specifies if blood or blood products were given upon arrival in the ED (or hospital for direct admit patients).
Software Field Name	ED_BLOOD
Data Type	Character (Single entry allowed)
Values	<p>Blood or blood products <b>include</b>: whole blood, packed red blood cells, platelets, plasmanate, cell saver, fresh frozen plasma, albumin.</p> <p>Blood or blood products <b>do not include</b>: artificial blood products such as cryoprecipitate.</p> <p>Y Yes, blood or blood products given NOS.</p> <p>N No, blood or blood products not given per documentation.</p> <p>UNK Unknown (either inadequate or no documentation)</p> <p>NA Not applicable, not an ED/inpatient at your hospital</p>
Discussion/Uses	Fill in the first set of procedures performed upon arrival in your hospital (ED or inpatient admit). If it is not done upon arrival, record NOT.
EDIT	UT.E26 (Pass)
EXPORT FIELD	PROCEDURE_CODE_SRC / PROCEDURE LOCATION CODE / PROCEDURE_RESULT (129/118/115)

**E 27. ED/Inpatient Thoracostomy**

Definition	Describes if a thoracostomy (needle or chest tube) was performed upon arrival in the ED (or hospital for direct admit patients).		
Software Field Name	ED_THOR		
Data Type	Character (Single entry allowed)		
Values	Y	Yes, a thoracostomy was performed (or maintained from scene).	
	N	No, a thoracostomy was not performed per documentation.	
	UNK	Unknown (either inadequate or no documentation)	
	NA	Not applicable, not an ED/inpatient at your hospital	
Discussion/Uses	Fill in the first set of procedures performed upon arrival in your hospital (ED or inpatient admit). If it is not done upon arrival, record NOT.		
EDIT	UT.E27 (Pass)		
EXPORT FIELD	PROCEDURE_CODE_SRC / PROCEDURE LOCATION CODE / PROCEDURE_RESULT (129/118/115)		

**E 28. ED/Inpatient Head CT**

Definition	Describes if a head CT was performed upon arrival in the ED (or hospital for direct admit patients).	
Software Field Name	ED_HEADCT	
Data Type	Character (Single entry allowed)	
Values	Y	Yes, a head CT was performed.
	N	No, a head CT was not performed per documentation.
	UNK	Unknown (either inadequate or no documentation)
	NA	Not applicable, not an ED/inpatient at your hospital
Discussion/Uses	Fill in the first set of procedures performed upon arrival in your hospital (ED or inpatient admit). If it is not done upon arrival, record NOT.	
EDIT	UT.E28 (Pass)	
EXPORT FIELD	PROCEDURE_CODE_SRC / PROCEDURE LOCATION CODE / PROCEDURE_RESULT (129/118/115)	

**E 29. ED/Inpatient Diagnostic Peritoneal Lavage**

Definition	Indicates if a diagnostic peritoneal lavage (DPL or PL) was performed upon arrival in the ED (or hospital for direct admit patients).	
Software Field Name	ED_PL	
Data Type	Character (Single entry allowed)	
Values	Y	Yes, a DPL was performed.
	N	No, a DPL was not performed per documentation.
	UNK	Unknown (either inadequate or no documentation)
	NA	Not applicable, not an ED/inpatient at your hospital
Discussion/Uses	Fill in the first set of procedures performed upon arrival in your hospital (ED or inpatient admit). If it is not done upon arrival, record NOT.	
EDIT	UT.E29 (Pass)	
EXPORT FIELD	PROCEDURE_CODE_SRC / PROCEDURE LOCATION CODE / PROCEDURE_RESULT (129/118/115)	

**E 30. ED/Inpatient Focused Abdominal Sonography Test**

Definition	Determines if a focused abdominal sonography test (FAST) was performed upon arrival in the ED (or hospital for direct admit patients).
Software Field Name	ED_FAST
Data Type	Character (Single entry allowed)
Values	Y Yes, a FAST was performed. N No, a FAST was not performed per documentation. UNK Unknown (either inadequate or no documentation) NA Not applicable, not an ED/inpatient at your hospital
Discussion/Uses	Fill in the first set of procedures performed upon arrival in your hospital (ED or inpatient admit). If it is not done upon arrival, record NOT.
EDIT	UT.E30 (Pass)
EXPORT FIELD	PROCEDURE_CODE_SRC / PROCEDURE LOCATION CODE / PROCEDURE_RESULT (129/118/115)

**E 31. ED/Inpatient Abdominal CT**

Definition	Determines if an abdominal CT was performed upon arrival in the ED (or hospital for direct admit patients).
Software Field Name	ED_ABDCT
Data Type	Character (Single entry allowed)
Values	Y Yes, an abdominal CT was performed. N No, an abdominal CT was not performed per documentation. UNK Unknown (either inadequate or no documentation) NA Not applicable, not an ED/inpatient at your hospital
Discussion/Uses	Fill in the first set of procedures performed upon arrival in your hospital (ED or inpatient admit). If it is not done upon arrival, record NOT.
EDIT	UT.E31 (Pass)
EXPORT FIELD	PROCEDURE_CODE_SRC / PROCEDURE LOCATION CODE / PROCEDURE_RESULT (129/118/115)

**E 32. ED/Inpatient Thorocotomy**

Definition	Determines if a thorocotomy (open chest) was performed upon arrival in the ED (or hospital for direct admit patients).
Software Field Name	ED_TCOT
Data Type	Character (Single entry allowed)
Values	Y Yes, thorocotomy was performed N No, thorocotomy was not performed per documentation UNK Unknown (either inadequate or no documentation) NA Not applicable, not an ED/inpatient at your hospital
Discussion/Uses	Fill in the first set of procedures performed upon arrival in your hospital (ED or inpatient admit). If it is not done upon arrival, record NOT.
EDIT	UT.E32 (Pass)
EXPORT FIELD	PROCEDURE_CODE_SRC / PROCEDURE LOCATION CODE / PROCEDURE_RESULT (129/118/115)

**E 33. ED Discharge Disposition**

Definition	The disposition of the patient at time of discharge from the ED.	
Software Field Name	ED_DISPOSITION_CODE	
Data Type	Character (Single entry allowed)	
Values	FLOOR	Floor Bed (general admission, non specialty unit hospital bed)
	OR	Operating room
	OBS	Observation unit (a unit in or out of ED that provides for < 24 hour stays)
	ICU	Intensive care unit (a unit that provides care for patients with highest acuity)
	TELE	Telemetry/Step-down unit (a unit providing less acute care than ICU but more than hospital floor)
	HOME	Home
	HOSP	Transferred to another hospital (transferred out to another acute care facility by an EMS Agency)
	DOA	Dead on arrival (patient arrives to ED dead and not worked)
	D	Death in ED (patient arrives to ED alive and dies after arrival in ED and before discharge from ED)
	AMA	Left against medical advice
	UNK	Unknown (inadequate or no documentation)
	NA	Not applicable, not seen in ED and/or was a Direct Admit ( <b>Admit Type</b> = 'D')
Discussion/Uses		
EDITS	UT.E33; UT.E33S; UT.E33SV	
EXPORT FIELD	ED_DISPOSITION_CODE_SRC (471)	



**E 34. ED Transferring EMS Agency**

Definition	The EMS Agency that transferred the patient out of your ED, if patient was discharged to another hospital ( <b>ED Discharge Disposition</b> = 'HOSP').
Software Field Name	ED_TRANSFER_MODE
Data Type	Integer (Single entry allowed)
Values	Range: 0101L—2931L  *Each <b>EMS Agency</b> in the state of Utah is assigned a code by the Utah Department of Health. See Appendix B—EMS Agency Codes, page 144 for the list of Licensed Utah EMS Agency codes.  OTHER Other  UNK Unknown (either inadequate or no documentation)  NA Not applicable, patient not transferred to another hospital ( <b>ED Discharge Disposition</b> <u>does not</u> = 'HOSP').
Discussion/Uses	This field is conditional. Complete only if the patient was transferred from your hospital to another hospital ( <b>ED Discharge Disposition</b> = 'HOSP' and ADMIT_TYPE = 'T')
EDITS	UT.E34
EXPORT FIELD	ED_TRANSFER_MODE (175)

**E 35. ED Discharge Destination Hospital**

Definition	The receiving hospital if the patient was transferred out of the ED to another hospital ( <b>ED Discharge Disposition</b> = 'HOSP').
Software Field Name	ED_DESTINATION_CODE
Data Type	Character (Single entry allowed)
Values	<p>Hospital codes are assigned by the Utah Department of Health. The list of codes can be found in Appendix A—Hospital Codes, page 142.</p> <p>Codes under 100 (non-hospital codes) are not valid.</p> <p>UNK Unknown (either inadequate or no documentation)</p> <p>NA Not applicable, patient not transferred to another hospital (<b>ED Discharge Disposition</b> <u>does not</u> = 'HOSP').</p>
Discussion/Uses	This field is conditional. Complete only if the patient was transferred from your hospital to another hospital ( <b>ED Discharge Disposition</b> = 'HOSP').
EDITS	UT.E35
EXPORT FIELD	ED_DESTINATION_CODE_SRC (176)

**E 36. Inpatient Discharge Disposition**

Definition The disposition of the patient at the time of discharge from your hospital.

Software Field Name DC\_DISPOSITION\_CODE

Data Type Character (Single entry allowed)

Values	HOSP	Transferred to another acute care hospital
	HOME	Returned home, self care
	HH	Returned home, requiring home health services and/or outpatient rehabilitation
	NH	Transferred to a residential facility without skilled nursing services or with an unknown level of nursing care
	REHAB	Transferred to an inpatient rehabilitation facility
	SWING	Hospital long-term care bed
	TCU	Transitional care unit
	JAIL	Release to jail facility or other detention center
	OTHER	Other
	DOA	Dead on arrival
	D	Death in hospital
	AMA	Left against medical advice
	UNK	Unknown (either inadequate or no documentation)
	NA	Not applicable, not an inpatient at your hospital

Discussion/Uses

EDIT UT.E36; UT.E36S; UT.E36SV

EXPORT FIELD DC\_DISPOSITION\_CODE\_SRC (249)

**E 37. Inpatient Discharge Destination Hospital**

Definition	The receiving hospital if the patient was transferred out of your hospital to another hospital ( <b>Inpatient Discharge Disposition</b> = 'HOSP').
Software Field Name	DC_DESTINATION_CODE
Data Type	Integer (Single entry allowed)
Values	<p>Hospital codes are assigned by the Utah Department of Health. The list of codes can be found in Appendix A—Hospital Codes, page 142.</p> <p>Codes under 100 (non-hospital codes) are not valid.</p> <p>UNK Unknown (either inadequate or no documentation)</p> <p>NA Not applicable, patient not transferred to another hospital (<b>Inpatient Discharge Disposition</b> <u>does not</u> = 'HOSP').</p>
Discussion/Uses	This field is conditional. Complete only if the patient was transferred from your hospital to another hospital ( <b>Inpatient Discharge Disposition</b> = 'HOSP').
EDITS	UT.E37; UT.E37S; UT.E37SV
EXPORT FIELD	DC_DESTINATION_CODE_SRC (14)

**E 38. Outcome**

Definition	The patient's survival status at your hospital.
Software Field Name	OUTCOME
Data Type	Character (Single entry allowed)
Values	A      Alive D      Dead
Discussion/Uses	This field applies to all patients regardless of admit status.
EDITS	UT.E38; UT.E38V(if outcome is D, makes sure destination is 85 or 55)
EXPORT FIELD	OUTCOME (13)

**E 39. Functional Discharge Status**

**Definition** The **self-feeding score** is the functional independence measure of a patient's self-feeding abilities upon discharge from the hospital. Includes using suitable utensils to bring food to mouth chewing and swallowing. Opening containers, cutting meat, buttering bread and pouring liquids are not included, as they are often part of meal preparation.

The **locomotion score** is the functional independence measure of patient locomotion abilities upon discharge from the hospital. Includes walking once in a standing position, or using a wheelchair, once in a seated position indoors.

The **expression score** is a functional independence measure of expression. Includes clear expression of verbal or nonverbal language. This means expressing linguistic information verbally or graphically with appropriate and accurate meaning and grammar.

**Software Field Name** FSEXP, FSFEED, FSLOC

**Data Type** Character (Single entry allowed)

**Values** **Self-feeding score**

- 4 Independent, eats and drinks in a customary manner
- 3 Independent with device, eats drinks with device assistance
- 2 Dependent, requires supervision with eating
- 1 Dependent, does not eat or drink by mouth
- NA Not applicable (died or child <3 years old)
- NOT Not assessed per documentation
- UNK Unknown (either inadequate or no documentation)

**Locomotion score**

- 4 Independent, walks 150 ft without device assistance
- 3 Independent with device, walks or wheels 150 ft with device assistance
- 2 Dependent with some assistance, walks or wheels 50 ft with supervision
- 1 Dependent, does not walk or wheel at least 50 ft
- NA Not applicable (died or child not yet walking)
- NOT Not assessed per documentation
- UNK Unknown (either inadequate or no documentation)

**Expression score**

4	Independent, expresses ideas intelligently and fluently
3	Independent with device, expresses ideas with mild difficulty
2	Dependent, expresses basic needs half the time
1	Dependent, expresses basic needs with prompting
NA	Not applicable (died or child <5 years old)
NOT	Not assessed per documentation
UNK	Unknown (either inadequate or no documentation)

Discussion/Uses      Select the most appropriate functional discharge status score of a patient's self-feeding, locomotion, and expression abilities. If patient has normal self-feeding, locomotion, and expression abilities select normal.

For patients seen at Primary Children's Medical Center, enter the appropriate WEEFIM score when applicable.

EDITS                    UT.E39EXP; UT.E39FEED; UT.E39LOC

EXPORT FIELD        ORGAN\_SRC / DISCHARGE\_CONDITIONS\_SRC (234/140)

**E 40. Inpatient Length of Stay**

Definition	The total number of patient days for an inpatient episode, calculated by subtracting the date of discharge from the date of admission.
Software Field Name	LOS
Data Type	Integer (Single entry allowed)
Values	Range: 0—600  0      ED/transfer patient only. Not admitted as an inpatient.
Discussion/Uses	If a patient is admitted as an inpatient and discharged on the same day, the LOS is 1 day. Patients only seen in the ED or transferred out should have a length of stay recorded as 0.
EDITS	UT.E40; UT.E40V (checks for negative LOS)
EXPORT FIELD	LOS (119)



**E 41. Payment Sources**

Definition	Indicates sources of payment to this hospital for the visit.	
Software Field Name	PAYMENT_SOURCE	
Data Type	Character (Multiple entry allowed)	
Values	<b>BCBS</b>	<b>Blue Cross/Blue Shield-</b> Includes state or regional Blue Cross, Blue Shield, or Blue Cross/Blue Shield (BCBS) indemnity plans. These can fall under the guise of a state medical society, a prominent institution or a large regional employer and, as such, the BCBS indemnity plan may assume a hybrid title with the sponsoring institution.
	<b>COM</b>	<b>Commercial Insurance-Other commercial plans-</b> Includes any commercial health insurance plan that does not enroll physicians as part of a network or require that its physicians obtain authorization prior to hospitalization of non-emergent patients. Such plans include fee-for-service coverage and managed indemnity organizations (these organizations may require that their physicians obtain authorization prior to hospitalization of non-emergent patients, although they are not classified as managed care organizations because they do not enroll physicians as part of a network).
	<b>GOVT HMO</b>	<b>Other Government subsidized programs</b> <b>Health Maintenance OrganizationHMO / PPO/ POS</b> Commercial health indemnity plans whose physicians are part of an integrated network and must obtain authorization prior to hospitalization of non-emergency organizations, point-of-service organizations, independent practice organizations, and exclusive provider organizations patients. Such plans include health maintenance organizations, preferred provider
	<b>IHS LAW</b>	<b>Indian Health Service</b> <b>Law Enforcement-</b> Includes patients in custody of public safety agency.
	<b>MCAID</b>	<b>Medicaid-</b> Includes any trauma patient receiving federal/state funding of their inpatient medical bills under Title XIX of the Social Security Act. This will generally involve patients who are recipients of Aid to Families with Dependent Children or Social Security Income, pregnant women and children below the Federal poverty level (FPL), as well as certain aged, blind, disabled, and institutionalized persons below the FPL, and other medically needy persons. Dual eligible, that are those patients who receive both Medicare and Medicaid support should be coded as Medicare since Medicaid contributions to the hospital bill for dual eligible are most often supplementary to the primary payer, Medicare. Individuals covered under Medicaid 1115 or similar plans whose hospital care is paid for via public Medicaid funds yet overseen by a commercial managed care organization, should be coded as Medicaid and not managed care organization patients.
	<b>MCARE</b>	<b>Medicare-</b> Includes any trauma patient receiving federal

funding of their inpatient medical bills under Title XVIII of the Social Security Act. This will generally involve patients 65 or more years of age, patients entitled to disability benefits for 24 months or more, end-stage renal disease patients, and certain otherwise non-covered persons who elect to buy into the program. Dual eligible, which are those patients who receive both Medicare and Medicaid support, should be coded as Medicare since Medicaid contributions to the hospital bill for dual eligible are most often supplementary to the primary payer, Medicare. Individuals covered under Medicare coordinated plans whose hospital care is paid for via public Medicare funds yet overseen by a commercial managed care organization, should be coded as Medicare and not managed care organization patients.

<b>NF</b>	<b>No Fault Automobile Insurance</b> -Includes any reimbursement of hospital medical bills by a commercial automobile insurance program resulting from injuries suffered during a motor vehicle crash.
<b>OTHER</b>	<b>Other</b> -Includes any other payment source not previously classified (Example: Shriners, Victims of Crime, Med Utah, etc.)
<b>SELF</b>	<b>Self-pay</b> Includes cases where the patient is listed as the primary source of payment for their own medical care. This classification applies whether or not payment was actually obtained by the billing institution or clinician.
<b>WORK</b>	<b>Workers Compensation</b> -Includes any primary source of hospital payment via a worker's compensation program for individuals suffering on-the-job injuries.
<b>CHIP</b>	<b>CHIP</b> The State Children's Health Insurance Program was initiated for children in families who make too much to qualify for Medicaid, but who cannot afford to purchase health insurance on their own.
<b>NA</b>	<b>Not applicable</b>
<b>UNK</b>	<b>Unknown</b> -The principal payment source is not known.

## Discussion/Uses

List as many payment sources as apply sequentially from primary payment source to secondary payment source, etc. The order that payment sources are entered will determine whether it is the primary, secondary, etc. payment source.

Used for reimbursement evaluation, health care administration, finance, research.

## EDITS

UT.E41; UT.E41S; UT.E41SV

## EXPORT FIELD

PAYMENT\_SOURCE\_SRC (138)

## **F.    Diagnosis Data**

**F 1. ICD-9-CM Diagnosis Codes**

Definition	The 15 most severe ICD-9-CM diagnosis codes for each major diagnosis of the trauma patient. Please include all injury diagnosis codes, then major medical diagnosis codes and pre-existing condition diagnosis codes.																
Software Field Name	ICD9_1 – ICD9_10 (Injury codes); ICD9_N1- ICD9_N5 (Non-injury codes)																
Data Type	Numeric (Multiple values allowed)																
Values	Utah Trauma Registry ICD-9-CM Injury Diagnosis Code Range: 800.0-959.9, 760.5, 641.8, 518.5  Example of Major Medical and Pre-Existing Condition ICD-9-CM Codes:  <table> <tr><td>Myocardial Infarction</td><td>410</td></tr> <tr><td>Hypertension</td><td>401-405</td></tr> <tr><td>COPD</td><td>490-496</td></tr> <tr><td>Stroke</td><td>436</td></tr> <tr><td>Diabetes</td><td>250</td></tr> <tr><td>Liver Disease</td><td>571</td></tr> <tr><td>Pneumonia</td><td>480</td></tr> <tr><td>Obesity</td><td>278</td></tr> </table> See diagnostic codes found in the International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM) for available value codes.	Myocardial Infarction	410	Hypertension	401-405	COPD	490-496	Stroke	436	Diabetes	250	Liver Disease	571	Pneumonia	480	Obesity	278
Myocardial Infarction	410																
Hypertension	401-405																
COPD	490-496																
Stroke	436																
Diabetes	250																
Liver Disease	571																
Pneumonia	480																
Obesity	278																
Discussion/Uses	This field cannot be left blank. If medical chart lists diagnosis codes, record the codes starting with the most severe injury diagnoses. If no diagnosis codes are found in medical chart or coding is incomplete, code using software code-finder lookup.  Key the ICD-9-CM code in and hit enter. This will add to the list of codes. Or you may also select the code-finder method of finding ICD-9-CM codes from options in Trauma Registry software.																
EDITS	UT.F1																
EXPORT FIELD	ICD9 (95)																

**F 2.                      Diagnosis Text**

Definition	A text description for each ICD-9-CM injury diagnosis code.
Software Field Name	DIAGNOSES
Data Type	Character/Free text field (Multiple values allowed)
Values	All values are allowed. The trauma registry software will default <b>Diagnoses Text</b> corresponding to the <b>ICD-9-CM Diagnosis Codes</b> chosen or you may enter free text.
Discussion/Uses	
EDITS	UT.F2
EXPORT FIELD	DIAGNOSES (92)

**F 3.                      Region**

Definition	The body region corresponding to the ICD-9-CM injury diagnosis code chosen.																										
Software Field Name	REGION1_REGION10																										
Data Type	Character (Multiple value allowed)																										
Values	<p><u>Manual entry is not required.</u> The trauma registry software will default to a body <b>Region</b> based on the <b>ICD-9-CM Diagnosis Codes</b> entered.</p> <table> <tr><td>ABD</td><td>Abdomen/Pelvic Contents</td></tr> <tr><td>ARM</td><td>UpperExtremities</td></tr> <tr><td>CHEST</td><td>Thorax</td></tr> <tr><td>CS</td><td>CervicalSpine</td></tr> <tr><td>EXT</td><td>External</td></tr> <tr><td>FACE</td><td>Face</td></tr> <tr><td>HEAD</td><td>Head</td></tr> <tr><td>LEG</td><td>Lower Extremities</td></tr> <tr><td>LS</td><td>Lumbar Spine</td></tr> <tr><td>NECK</td><td>Neck</td></tr> <tr><td>SPINE</td><td>Spine Unspecified</td></tr> <tr><td>TS</td><td>Thoracic Spine</td></tr> <tr><td>UNSPEC</td><td>Unspecified</td></tr> </table> <p>*This is a standard list used for later AIS and ISS calculations and should not be altered by the user.</p>	ABD	Abdomen/Pelvic Contents	ARM	UpperExtremities	CHEST	Thorax	CS	CervicalSpine	EXT	External	FACE	Face	HEAD	Head	LEG	Lower Extremities	LS	Lumbar Spine	NECK	Neck	SPINE	Spine Unspecified	TS	Thoracic Spine	UNSPEC	Unspecified
ABD	Abdomen/Pelvic Contents																										
ARM	UpperExtremities																										
CHEST	Thorax																										
CS	CervicalSpine																										
EXT	External																										
FACE	Face																										
HEAD	Head																										
LEG	Lower Extremities																										
LS	Lumbar Spine																										
NECK	Neck																										
SPINE	Spine Unspecified																										
TS	Thoracic Spine																										
UNSPEC	Unspecified																										
Discussion/Uses	The trauma registry software uses the <b>Region</b> and the injury diagnoses' associated <b>AIS Score</b> in calculating the <b>Injury Severity Score (ISS)</b> . See Appendix F—Calculating Injury Severity Score.																										
EDITS	UT.F3																										
EXPORT_FIELD	REGION (94)																										

**F 4.                      Abbreviated Injury Scale (AIS) Score**

Definition	The <b>Abbreviated Injury Scale (AIS) Score</b> is a numeric classification of the severity of the patient's injuries listed from ICD-9-CM diagnosis codes. The <b>AIS Score</b> recorded here is defined as value to the right of the decimal in the full 7-digit AIS Code.
Software Field Name	AIS1— AIS10
Data Type	Character (Multiple entry allowed)
Values	<p><u>Manual entry is not required.</u> The trauma registry software will default to a <b>AIS Score</b> based on the <b>ICD-9-CM Diagnosis Codes</b> entered.</p> <p><b>AIS Score</b> assigned only for ICD-9-CM injury diagnosis codes: 800 -- 959.9, 760.5, 641.8, and 518.5.</p> <p>Range: 1—6 (See Appendix E—Calculating Abbreviated Injury Scale , page 149.)</p> <p>9            Unknown or Not applicable</p>
Discussion/Uses	<p>The <b>AIS Score</b> should not be assigned on a subjective basis, but as the result of coding the full 7-digit <b>AIS Score</b> through the current AIS Coding book. In the trauma registry software, the value options intentionally do not contain descriptions for numbers 2, 3, 4, and 5 for this reason.</p> <p>The trauma registry software uses the <b>Region</b> and its' associated <b>AIS Score</b> in calculating the <b>Injury Severity Score (ISS)</b>. See Appendix F—Calculating Injury Severity Score, page 150.</p>
EDITS	UT.F4 (works only if you add 1 or 2 to the LEVEL field in the INSTITUTE file...this is for TraumaBase hospitals only.
EXPORT FIELD	AIS (93)

**F 5. Injury Severity Score (ISS)**

Definition	The <b>Injury Severity Score (ISS)</b> calculated from multiple values for the <b>AIS Score</b> . The <b>ISS</b> is the sum of squares of the three highest values for the <b>AIS Score</b> from the three most severely injured body <b>Regions</b> . See Appendix F—Calculating Injury Severity Score, page 150.
Software Field Name	ISS
Data Type	Character (Multiple values allowed)
Values	<u>Manual entry is not required.</u> The trauma registry software will internally calculate <b>ISS</b> based on <b>AIS Scores</b> for the three most severely injured body <b>Regions</b> .  Range: 1—75  UNK Unknown
Discussion/Uses	If any of the three values for <b>AIS Score</b> is 9 (meaning Unknown or Not applicable), an <b>ISS</b> cannot be calculated and the trauma registry software will generate an UNK (Unknown) value.
EDITS	UT.F5 (onl for TraumaBase hospitals..see above)
EXPORT FIELD	ISS (51)



## **G. Procedure Data**

**G 1. Procedure Code Group**

Definition	The general grouping category for procedures done to the patient either at the scene, referring hospital, emergency department or admitting hospital (including the OR).
Software Field Name	PROCEDURE_CODE
Data Type	Character (Multiple values allowed)
Values	<p>Values are listed in the trauma registry software pick list. Select the most appropriate <b>Procedure Code Group</b> for the specific procedure to be entered in the <b>ICD-9-CM Procedure Code</b> field.</p> <p>Procedures previously recorded in software (pertaining to Airway Management, CPR, Fluids Administered, Blood Given, Thoracostomy, Head CT, DPL, FAST, and Abdominal CT done at the scene, referring hospital, emergency department or other hospital location) will be auto-filled in this field by the trauma registry software.</p>
Discussion/Uses	None
EDITS	UT.G1; UT.G1S; UT.G1SV
EXPORT FIELD	PROCEDURE_CODE_SRC / PROCEDURE_EPISODE / PROCEDURE_LOCATION_CODE (129)

**G 2. Procedure Episode**

Definition	The operative episode number indicator for each OR procedure performed on the patient.
Software Field Name	EPISODE
Data Type	Character (Multiple values allowed)
Values	Range: 1—6  NA Not applicable, not an OR procedure
Discussion/Uses	This number is used to identify groups of procedures done at the same time in the OR.
EDITS	UT.G2 (trips only if PROCEDURE_LOCATION_CODE = "OR")
EXPORT FIELD	PROCEDURE_EPISODE (279)

**G 3. Procedure Location**

Definition	The location type where each procedure was performed on the patient.	
Software Field Name	PROCEDURE_LOCATION_CODE	
Data Type	Character (Multiple values allowed)	
Values	REF	Referring Hospital
	SCENE	Scene (including Transporting Units)
	ED	Emergency Department
	OR	Operating Room
	OTHER	Other location within your hospital other than ED and OR
Discussion/Uses	This data element is useful in grouping and identifying procedures done at various segments of patient trauma care.	
EDITS	UT.G3	
EXPORT FIELD	PROCEDURE_LOCATION_CODE (118)	

**G 4. Procedure ICD-9-CM Code**

Definition	Operative and essential procedures during hospital stay. Please include up to 15 ICD-9-CM operative procedure codes and major intervention codes.
Software Field Name	PROCEDURE_ICD9
Data Type	Character (Multiple values allowed)
Values	Range: 00.00—99.99  See procedure codes found in the International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM) found in Volume 3 for available value codes.
Discussion/Uses	List procedure codes that are recorded in the medical record. If no procedures are coded, use the International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM) Volume 3 to select the appropriate code.
EDITS	UT.G4
EXPORT FIELD	PROCEDURE_ICD9 (212)

**G 5. Procedure Start Time**

Definition	The start time for each procedure performed in the operating room.
Software Field Name	PROCEDURE_START_TIME
Data Type	Military Time - hh:mm (Multiple values allowed)
Values	Range: 00:00 to 23:59 UNK Unknown
Discussion/Uses	None
EDITS	UT.G5 (Only trips on OR Procedures right now...)
EXPORT FIELD	PROCEDURE_START_TIME (131)

**G 6. Procedure Start Date**

Definition The start date for each procedure performed in the operating room.

Software Field Name PROCEDURE\_START\_DATE

Data Type Date - mmddyyyy (Multiple values allowed)

Values Valid date ("/"s and "-"s not needed in data entry)

Month:

01	January	07	July
02	February	08	August
03	March	09	September
04	April	10	October
05	May	11	November
06	June	12	December

Day: 01-31

Year: The year must be 4-digits, i.e.: 2001.

UNK Unknown (either inadequate or no documentation)

NA Not applicable

Discussion/Uses None

EDITS UT.G6

EXPORT FIELD PROCEDURE\_START\_DATE (130)

## Appendix A—Hospital Codes

<u>Code</u>	<u>Description/Hospital</u>
010	Transporting Unit
025	Doctor's Office
030	Free Standing Clinic
040	Home
042	Rehab/TCU at your facility
043	Rehab/TCU at another facility
045	Long Term Facility/Nursing Home
050	Mental Health Facility
055	Mortuary Facility
060	Other Non-Hospital Facility
070	Police/Jail Facility
075	Airport
080	Diagnostic Facility
085	State Medical Examiner
090	Surgical Center
Hospitals:	
135	BEAR RIVER VALLEY HOSPITAL- Tremonton
140	BRIGHAM CITY COMMUNITY HOSPITAL- Brigham City
145	DAVIS HOSPITAL & MEDICAL CENTER- Layton
150	LAKEVIEW HOSPITAL- Bountiful
155	LOGAN REGIONAL HOSPITAL- Logan
160	MCKAY DEE HOSPITAL- Ogden
165	OGDEN REGIONAL MEDICAL CENTER- Ogden
170	MOUNTAIN WEST MEDICAL CENTER-Toole
180	CACHE VALLEY SPECIALTY HOSPITAL-North Logan
220	ALTA VIEW HOSPITAL- Sandy
225	COTTONWOOD HOSPITAL-Murray
230	SALT LAKE REGIONAL MEDICAL CENTER- Salt Lake City
235	JORDAN VALLEY HOSPITAL- West Jordan
240	LDS HOSPITAL- Salt Lake City
245	PIONEER VALLEY HOSPITAL- West Valley
250	PRIMARY CHILDREN'S MEDICAL CENTER- Salt Lake City
260	ST. MARK'S HOSPITAL-Salt Lake City
265	U OF U MEDICAL CENTER- Salt Lake City
270	VETERANS ADMINISTRATION MEDICAL CENTER- Salt Lake City
280	ROCKY MOUNTAIN MEDICAL CENTER- Salt Lake City
330	AMERICAN FORK HOSPITAL-American Fork
335	ASHLEY VALLEY MEDICAL CENTER- Vernal
340	CASTLEVIEW HOSPITAL- Price
345	UINTAH BASIN MEDICAL CENTER- Roosevelt
350	MOUNTAIN VIEW HOSPITAL-Payson
355	OREM COMMUNITY HOSPITAL- Orem
360	UTAH VALLEY HOSPITAL- Provo
365	HEBER VALLEY MEDICAL CENTER- Heber City
370	TIMPANOGOS REGIONAL MEDICAL CENTER-Orem
440	FILLMORE COMMUNITY MEDICAL CENTER- Fillmore
445	GUNNISON VALLEY HOSPITAL- Gunnison
450	CENTRAL VALLEY MEDICAL CENTER- nEPHI
455	SANPETE VALLEY HOSPITAL-Mt. Pleasant
460	SEVIER VALLEY HOSPITAL-Richfield
465	DELTA COMMUNITY MEDICAL CENTER- Delta



530	ALLEN MEMORIAL HOSPITAL-Moab
535	BEAVER VALLEY HOSPITAL- Beaver
540	DIXIE REGIONAL MEDICAL CENTER- St. George
545	GARFIELD MEMORIAL HOSPITAL-Panguitch
550	KANE COUNTY HOSPITAL-Kanab
555	MILFORD VALLEY MEMORIAL-Milford
565	SAN JUAN HOSPITAL-Monticello
570	VALLEY VIEW MEDICAL CENTER- Cedar City
600	Wyoming hospital
610	Idaho hospital
620	Colorado hospital
630	Nevada hospital
640	Arizona hospital
650	New Mexico hospital
660	Montana hospital
699	Other out of state hospital

## Appendix B—EMS Agency Codes

### DEFINITIONS OF SERVICE LEVELS

AA= AIR AMBULANCE TRANSPORTING SERVICE

AMB= GROUND AMBULANCE TRANSPORTING SERVICE - BASIC TO INTERMEDIATE EMT LEVEL

AIT= GROUND AMBULANCE INTERFACILITY TRANSFER UNIT - BASIC TO INTERMEDIATE EMT

PA= PARAMEDIC AMBULANCE - TRANSPORTING PARAMEDIC SERVICE

PR = PARAMEDIC RESCUE, NON-TRANSPORTING PARAMEDIC SERVICE

PIT = PARAMEDIC INTERFACILITY TRANSFER UNIT – PARAMEDIC LEVEL SERVICES

QRU= QUICK RESPONSE UNIT - NON-TRANSPORTING UNIT

<u>Agency Code</u>	<u>Agency (Alphabetical List by Agency)</u>
1810L	AIR MED – U.U.M.C./AA
2727L	AIR REACT INC/AA
2415L	AIR RESPONSE NORTH/AA
1819D	ALTA FIRE DEPARTMENT/QRU
2501L	AMERICAN FORK AMBULANCE/AMB
0101L	BEAVER AMBULANCE/AMB
0602L	BOUNTIFUL FIRE DEPARTMENT/AMB
0203L	BOX ELDER COUNTY AMBULANCE /AMB
0201L	BRIGHAM CITY AMBULANCE/AMB
2532D	BRIGHAM YOUNG UNIVERSITY /QRU
0315D	CACHE CO. SEARCH & RESCUE/QRU
2104L	CANYON FUEL CO SUFCO, LLC /AMB
0408L	CANYON FUEL COMPANY, SKYLINE MINES/AMB
0402L	CARBON COUNTY AMBULANCE/AMB
0629D	CHEVRON REFINERY EMS/QRU
0905L	CLASSIC LIFE GUARD/AA
0620L	CLEARFIELD CITY CORP/CLEARFIELD CITY FIRE DEPT/AMB
0611D	CLINTON CITY FIRE/QRU
0612L	CLINTON CITY FIRE/AMB
0222L	CURLEW AMBULANCE SERVICE/AMB
0501L	DAGGETT COUNTY AMBULANCE/AMB
0502D	DAGGETT COUNTY SHERIFF'S OFFICE/QRU
0603L	DAVIS CO SHERIFF/PARAMEDICPR
0604L	DAVIS CO SHERIFF/AMBULANCE/AMB
0625L	DAVIS COUNTY SHERIFFS OFFICE/PR
0616L	DAVIS COUNTY SHERIFF'S OFFICE/PR
2402L	DESERET GENERATION & TRANSMISSION/AMB
2721L	DIXIE AMBULANCE SERVICE/PR
2702L	DIXIE AMBULANCE SERVICE, INC./PR
1852L	DRAPER CITY/SALT LAKE CO FIRE DEPT/AMB
1909L	EAGLE AIR MED CORPORATION/AA
2521D	EAGLE MOUNTAIN FIRE DEPARTMENT/QRU
2522L	EAGLE MOUNTAIN FIRE DEPARTMENT/AMB
2531D	ELK RIDGE FIRE DEPARTMENT/QRU

0801L	EMERY CO AMBULANCE SERVICE/AMB
2701L	ENTERPRISE AMBULANCE SERVICE/AMB
2007L	EPHRAIM CITY/EMPHRAIM AMBULANCE ASSOC./AMB
0630L	FARMINGTON CITY FIRE DEPT/AMB
0223D	FIELDING FIRST RESPONDERS /QRU
2730L	FLIGHT FOR LIFE/AA
0901L	GARFIELD CO AMBULANCE/AMB
2404L	GOLD CROSS AMB /E UTAH DIV/AMB
1803L	GOLD CROSS AMBULANCE/AMB
2510L	GOLD CROSS SERVICE INC/UTAH CO./AIT
1812L	GOLD CROSS/PARAMEDIC SERVICE /PIT
1001L	GRAND CO EMERGENCY MEDICAL SERV/AMB
2001L	GUNNISON VALLEY AMBULANCE/AMB
0406D	HELPER FIRE DEPARTMENT/QRU
2720L	HILDALE FIRE DEPARTMENT/PA
0216D	HONEYVILLE FIRE DEPARTMENT/QRU
2722L	HURRICANE CITY CORP/HURRICANE FIRE & RESCUE/PA
2703L	HURRICANE FIRE & RESCUE/PA
0302D	HYRUM FIRST RESPONDERS /QRU
1813L	IHC LIFE FLIGHT/AA
1101L	IRON COUNTY AMBULANCE/AMB
1102L	IRON COUNTY/IRON CO AMBULANCE/PARAMEDIC/PR
1201L	JUAB COUNTY AMBULANCE/AMB
1301L	KANE COUNTY AMBULANCE/AMB
0605D	KAYSVILLE CITY FIRE/QRU
0606L	KAYSVILLE CITY FIRE/AMB
0607L	LAYTON CITY FIRE DEPARTMENT/AMB
0631L	LAYTON CITY FIRE DEPT/DAVIS CO SHERIFF'S/PR
2729L	LEEDS AREA SPECIAL SERVICE DISTRICT/AMB
2502L	LEHI AMBULANCE SERVICE/AMB
0303D	LEWISTON FIRST RESPONDERS /AMB
0301L	LOGAN CITY AMBULANCE SERVICE/AMB
0310L	LOGAN CITY AMBULANCE SERVICE /PA
2519L	LONE PEAK PUBLIC SAFETY DISTRICT/AMB
2535L	LONE PEAK PUBLIC SAFETY DISTRICT/PR
2008L	MANTI AMBULANCE ASSOCIATION/AMB
2518L	MAPLETON EMERGENCY DEPARTMENT/AMB
2927L	MED FLIGHT AIR /AA
0313D	MENDON FIRE DEPARTMENT/QRU
2728L	MERCY AIR SERVICES/AIR LIFE/AA
1829D	MIDVALE CITY FIRE DEPARTMENT/QRU
1862L	MIDVALE CITY FIRE DEPARTMENT/AMB
1863L	MIDVALE CITY FIRE DEPARTMENT/PA
1830L	MIDVALE CITY FIRE DEPARTMENT/PR
0102L	MILFORD VALLEY AMBULANCE/AMB
1401L	MILLARD COUNTY AMBULANCE /AMB

0320D	MILLVILLE & NIBLEY FIRST RESPONDER /QRU
1501L	MORGAN COUNTY AMBULANCE/AMB
1857L	MURRAY CITY FIRE DEPARTMENT/PR
1827D	MURRAY CITY FIRE/QRU
2410D	NAPLES POLICE DEPARTMENT/QRU
0304D	NEWTON FIRST RESPONDERS /QRU
2520D	NORTH FORK FIRE DEPARTMENTQRU
0317D	NORTH LOGAN FIRE & RESCUE/QRU
2002L	NORTH SANPETE AMBULANCE SERVICE/AMB
2315D	NORTH TOOELE CO FIRE SERVICE DISTRICT/QRU
2919L	NORTHVIEW FIRE DEPT/AMB
2920L	OGDEN CITY AMBULANCE/AMB
2917L	OGDEN CITY CORPORATION/PA
2506L	OREM DEPARTMENT OF PUBLIC SAFETY/PA
0305D	PARADISE FIRST RESPONDERS /QRU
2220L	PARK CITY FIRE SERVICE DISTRICT /PR
2213D	PARK CITY FIRE SERVICE/QRU
2503L	PAYSON AMBULANCE ASSOCIATION/AMB
1601L	PIUTE CO COUNTY AMBULANCE/AMB
2921D	PLAIN CITY FIRE DEPARTMENT /QRU
2504L	PLEASANT GROVE AMBULANCE AMB
0205L	PLYMOUTH FIRE DEPT AMBULANCE /AMB
2505L	PROVO FIRE DEPT/PARAMEDIC /AMB
1701L	RICH COUNTY AMBULANCE /AMB
0316D	RICHMOND FIRST RESPONDERS /QRU
1807L	RIVERTON CITY CORP/SALT LAKE CO FIRE/AMB
2731L	ROCKVILLE/SPRINGDALE FIRE PROTECTION DISTRICT/PA
2902L	ROY FIRE AND RESCUE DEPARTMENT /AMB
2517L	SALEM EMERGENCY MEDICAL ASSO. /AMB
1804L	SALT LAKE CITY FIRE DEPT/PARAMEDIC /PR
1840D	SALT LAKE CITY FIRE RESCUE SERVICE /QRU
1802L	SALT LAKE CO FIRE/EMS/AMB
1808L	SALT LAKE CO FIRE/PARAMEDIC /PR
1815D	SALT LAKE CO SHERIFF SEARCH & RESCUE/QRU
1836D	SALT LAKE COUNTY DEFIB. /QRU
1904L	SAN JUAN EMS SERVICES/BLANDING /AMB
1901L	SAN JUAN EMS SERVICES/MONTICELLO /AMB
1908L	SAN JUAN REGIONAL AIR CARE /AA
1809L	SANDY CITY FIRE DEPARTMENT/PA
2711D	SANTA CLARA FIRE DEPARTMENT /QRU
2512L	SANTAQUIN CITY AMBULANCE /AMB
1403L	SCIPPIO AMBULANCE SERVICE /AMB
2101L	SEVIER COUNTY AMBULANCE /AMB
0307D	SMITHFIELD FIRE AND RESCUE /QRU
1814D	SOLITUDE SKI PATROL/QRU

0601L	SOUTH DAVIS FIRE DISTRICT /AMB
1831L	SOUTH JORDAN FIRE DEPARTMENT/AMB
1858L	SOUTH JORDAN FIRE DEPARTMENT/PA
2905D	SOUTH OGDEN FIRE DEPARTMENT/QRU
2930L	SOUTH OGDEN FIRE DEPARTMENT/AMB
1821D	SOUTH S L CITY FIRE DEPT/QRU
1822L	SOUTH S L CITY FIRE DEPT/PR
2202L	SOUTH SUMMIT AMBULANCE /AMB
2509L	SPANISH FORK AMBULANCE /AMB
2508L	SPRINGVILLE AMBULANCE /AMB
2725D	ST GEORGE CITY FIRE DEPARTMENT/QRU
1004L	ST MARYS AIR LIFE/ST MARYS HOSPITAL/AA
2310D	STOCKTON FIRE DEPARTMENT/QRU
2203L	SUMMIT COUNTY/PARK CITY FIRE DEPT/AMB
2221L	SUMMIT COUNTY/PARK CITY FIRE DEPT/AMB
0401L	SUNNYSIDE AMBULANCE SERVICE /AMB
0628D	SUNSET FIRE DEPARTMENT /QRU
0617D	SYRACUSE FIRE DEPARTMENT/QRU
0618L	SYRACUSE FIRE DEPARTMENT/AMB
0210L	THIOKOL FIRE PREVENTION DEPT/AMB
2302L	TOOELE VALLEY AMBULANCE SERVICE /AMB
0202L	TREMONTON FIRE DEPT AMB/AMB
0701L	UINTAH BASIN MEDICAL CENTER /AMB
0715L	UINTAH BASIN MEDICAL CENTER /PR
2413D	UINTAH COUNTY SHERIFF'S DEPARTMENT/QRU
1826D	UTAH AIR NATIONAL GUARD /QRU
2526D	UTAH COUNTY SHERIFF SEARCH & RESCUE/QRU
1850D	UTAH STATE PRISON /QRU
2403L	UTE TRIBE AMBULANCE SERVICE/AMB
2412D	VERNAL POLICE DEPARTMENT /QRU
2601L	WASATCH COUNTY AMBULANCE /AMB
2907D	WASHINGTON TERRACE FIRE DEPT /QRU
2801L	WAYNE COUNTY AMBULANCE /AMB
2915L	WEBER COUNTY CORP/ OGDEN CITY CORP/PR
2916L	WEBER COUNTY CORP/PARA/ROY/PR
2924L	WEBER COUNTY CORP/ROY CITY CORP/PA
2926L	WEBER COUNTY FIRE DISTRICT/QRU
2925D	WEBER FIRE DISTRICT/AMB
2903L	WEBER FIRE DISTRICT/OGDEN /PA
0306D	WELLSVILLE FIRST RESPONDERS /QRU
2301L	WENDOVER AMBULANCE /QRU
2318D	WENDOVER FIRST RESPONDERS/QRU
1842L	WEST JORDAN FIRE DEPARTMENT /AMB
1861L	WEST JORDAN FIRE DEPARTMENT /AMB
1823L	WEST VALLEY CITY FIRE DEPARTMENT SALT LAKE CO/PR
1822D	WEST VALLEY CITY FIRE /QRU

0214D	WILLARD FIRST RESPONDERS
3000L	UNSPECIFIED UTAH EMS AGENCY

## Appendix C—Coding “UNK” vs. “NOT” or “N”

It is easy to confuse the way to correctly code data elements with regard to answers of unknown (UNK) and not done (NOT) or NO. The following instructions attempt to clarify these issues.

### Coding “UNK”

The coding of “UNK” is eligible to be endorsed for most of the data elements, except for the following.

#### Exceptions are:

- |   |   |
|---|---|
| <ul style="list-style-type: none"> <li>• Tracking Number</li> <li>• Hospital Number</li> <li>• Medical Record Number/SSN</li> <li>• Age/Age Unit</li> <li>• Trauma Type</li> <li>• Hospital Transfer</li> <li>• Admit Type</li> </ul> | <ul style="list-style-type: none"> <li>• ICD-9-CM codes (E-codes, Diagnosis codes, and Procedure codes)</li> <li>• Diagnosis Text</li> <li>• Procedure Code Group/ Episode/Location</li> <li>• Outcome</li> <li>• Inpatient Length of Stay</li> </ul> |
|---|---|

The coding of “UNK” for a data element asking for **patient course of care or injury information** means that there is either *no documentation* or *inadequate documentation* (unreadable or incomplete) in the medical record to indicate a definitive answer, therefore the data element must be answered “UNK”.

The coding of “UNK” for a data element asking for **referring hospital, scene/prehospital or ED/admitting hospital vitals or procedures** means either of the following:

- A. That there was *no documentation* in the medical record to indicate one way or the other whether the procedure or measure was performed, **or**
- B. That there was *inadequate documentation* (due to incomplete, or unreadable results) in which to determine the results of the measure conducted (per documentation). Therefore, even though the measure was documented done, the results are unknown to the data abstractor or trauma registrar entering the information and so the data element must be answered “UNK”.

### Coding “NOT”/“N”

The coding of “NOT” or “N” **only** applies a data element asking for **referring hospital, scene/prehospital or ED/admitting hospital vitals or procedures** and means that the vital sign or procedure was *documented not to have been assessed nor conducted* and therefore, in the case of a measure, there is no value or result to report (not done).

#### Data elements eligible to document “NOT”:

- Pulse/Respiratory Rate
- Systolic Blood Pressure
- ALL GCS component scores (Eye Opening, Verbal Response, Motor Response)
- Manual GCS
- Fluid/Airway Procedures
- Functional Discharge Status

#### Data elements eligible to document “N”:

- CPR
- Blood Given
- Thoracostomy
- Head CT
- Diagnostic Peritoneal Lavage
- FAST Test
- Abdominal CT

## Appendix D—Calculating Revised Trauma Score

The Revised Trauma Score (RTS) is a physiological scoring system, with high inter-rater reliability and demonstrated accuracy in predicting death. It is scored from the first set of data obtained on the patient, and consists of the Glasgow Coma Score, Systolic Blood Pressure, and Respiratory Rate.

<b>Respiratory Rate (RR)</b>	<b>Systolic Blood Pressure (SBP)</b>	<b>Glasgow Coma Score (GCS)</b>	<b>Score</b>
10-29/Minute	>89 mmHg	13-15	4
>29/Minute	76-89 mmHg	9-12	3
6-9/Minute	50-75 mmHg	6-8	2
1-5/Minute	1-49 mmHg	4-5	1
0	No Pulse	3	0

$$\text{RTS} = 0.9368 \text{ GCS} + 0.7326 \text{ SBP} + 0.2908 \text{ RR}$$

Values for the RTS are in the range 0 to 7.8408. The RTS is heavily weighted towards the Glasgow Coma Scale to compensate for major head injury without multi-system injury or major physiological changes.



## Appendix E—Calculating Abbreviated Injury Scale Score

The Abbreviated Injury Scale (AIS) is an anatomical scoring system first introduced in 1969 for use by crash investigators in assessing impact injury. Since this time it has been revised and updated against survival so that it now provides a reasonably accurate way of ranking the severity of injury. The latest incarnation of the AIS is the 1998 revision. A scaling committee of the Association for the Advancement of Automotive Medicine monitors and provides a manual to be consulted when scoring the AIS.

Injuries are scored 1 to 6, with 1 being minor and 6 being an unsurvivable injury. This represents the 'threat to life' associated with an injury and is not meant to represent a comprehensive measure of severity. The AIS is not an interval scale, in that the difference between AIS1 and AIS2 is not the same as that between AIS4 and AIS5.

<b>AIS</b>	<b>Injury Severity</b>
1	Minor injury
2	Moderate injury
3	Serious injury, not life threatening
4	Severe injury, life threatening, but survival probable
5	Critical injury, survival uncertain
6	Maximum injury, untreatable and virtually unsurvivable

## Appendix F—Calculating Injury Severity Score

The Injury Severity Score (ISS) is an anatomical scoring system that provides an overall score for patients with multiple injuries. Each injury is assigned an Abbreviated Injury Score (AIS) and is allocated to one of six body regions (Head, Face, Chest, Abdomen, Extremities, or External). Only the highest AIS scores in each body region are used. The 3 most severely injured body regions have their AIS score squared and added together to produce the ISS score.

An example of the ISS calculation is shown below:

Region	Injury Description	AIS	Square Top Three
<b>Head &amp; Neck</b>	Cerebral Contusion	3	9
<b>Face</b>	No Injury	0	
<b>Chest</b>	Flail Chest	4	16
<b>Abdomen</b>	Minor Contusion of Liver	2	
	Complex Rupture Spleen	5	25
<b>Extremities</b>	Fractured femur	3	
<b>External</b>	No Injury	0	
<b>Injury Severity Score:</b>			<b>50</b>

The ISS score takes values from 0 to 75. If an injury is assigned an AIS of 6 (unsurvivable injury), the ISS score is automatically assigned to 75. The ISS score is virtually the only anatomical scoring system in use and correlates linearly with mortality, morbidity, hospital stay and other measures of severity.

## Appendix G—Calculating Trauma and Injury Severity Score

The Trauma Injury Severity Score (TRISS) determines the probability of survival ( $P_s$ ) of a patient from the ISS and RTS using the following formula:

$$P_s = 1 / (1 + e^{-b})$$

Where 'b' is calculated from:

$$b = b_0 + b_1(RTS) + b_2(ISS) + b_3(AgeIndex)$$

The coefficients  $b_0$  -  $b_3$  are derived from multiple regression analysis of the Major Trauma Outcome Study (MTOS) database. Age Index is 0 if the patient is below 54 years of age or 1 if 55 years and over.  $b_0$  to  $b_3$  are coefficients which are different for blunt and penetrating trauma. If the patient is less than 15, the blunt index for  $b_3$  (Age) is used regardless of mechanism.

Coefficient	Blunt	Penetrating
<b>b0</b>	-0.4499	-2.5355
<b>b1</b>	0.8085	0.9934
<b>b2</b>	-0.0835	-0.0651
<b>b3</b>	-1.7430	-1.1360

Boyd CR, Tolson MA, Copes WS: "Evaluating Trauma Care: The TRISS Method", J Trauma 27:370-378;1987

### Sample TRISS Graph without Isobars From CDM Traumabase®

